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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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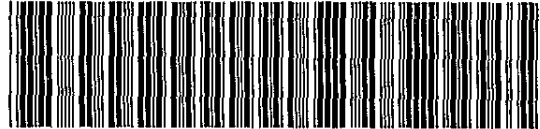
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

8/22/05
H5

TRANSMITTAL LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: RAGING CREEK CORPORATION
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 Filing Fee
☐ \$78.75 Filing Fee
& Certificate of Status

☐ \$78.75 Filing Fee
& Certified Copy
☒ \$87.50 Filing Fee,
Certified Copy
& Certificate of
Status
ADDITIONAL COPY REQUIRED

FROM: GLORIA TOMBACK
Name (Printed or typed)

13684 Deering Bay Drive
Address

Coral Gables, FL 33158
City, State & Zip

305-969-3956
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: **RAGING CREEK CORPORATION**

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: **13684 Deering Bay Drive
CORAL Gables, FL 33158**

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: **PROMOTIONAL MARKETING
AND CERAMIC MANUFACTURING**

ARTICLE IV SHARES

The number of shares of stock is: **1000**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

GLORIA Tomback : President / chairman	
13684 Deering Bay Drive	JEFFREY Tomback
CORAL Gables, FL 33158	13684 Deering Bay Drive
	CORAL Gables, FL 33158
	DIRECTOR

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

GLORIA Tomback
13684 Deering Bay Drive
CORAL Gables, FL 33158

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

GLORIA Tomback
13684 Deering Bay Drive
CORAL Gables, FL 33158

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Gloria Tomback
Signature/Registered Agent

8/17/2005
Date

Gloria Tomback
Signature/Incorporator

8/17/2005
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA