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(Re	equestor's Name)			
(Ad	ldress)			
(Address)				
(Cit	ty/State/Zip/Phone	· #)		
	_			
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
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TRANSMITTAL LETTER

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

SUBJECT: ReR	IDE, INC	•	
	(PROPOSED CORPORAT	TE NAME – <u>MUST INCL</u>	UDESUFFIX)
			•
Enclosed are an orig	ginal and one (1) copy of the artic	eles of incorporation and	a check for:
\$70.00	☑ \$78.75	□ \$78.75	\$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
,	& Certificate of Status	& Certified Copy	Certified Copy
		as common copy	& Certificate of
	,	•	Status
		ADDITIONAL CO	
			TTTEQUIED
FROM: D	ONNA BUNNER		
	Name (Printed or typed)	
	2462 SW THIGPEN AVE		
	A	ddress	
	ARCADIA, FL 34266		
	City, S	State & Zip	
	561-262-4869		
	Daytime Te	elephone 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:

ReRIDE, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 2462 SW THIGPEN AVE ARCADIA, FL 34266

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

DONNA BUNNER - PRESIDENT 2462 SW THIGPEN AVE ARCADIA, FL 34266 ALBERT BUNNER - VICE PRESIDENT 2462 SW THIGPEN AVE ARCADIA, FL 34266

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

PATRICIA A. BITTIKER, 931 VILLAGE BLVD #905-285, WEST PALM BEACH, FL 33409

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

DONNA BUNNER 2462 SW THIGPEN AVE ARCADIA, FL 34266

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

Signature/Registered Agent Date

Signature/Incorporator Date