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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

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COVER LETTER

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

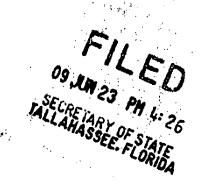
SUBJECT: RETS YO,	INC
(PROPOSED CORPORA	TE NAME – <u>MUST INCLUDE SUFFIX</u>)
Enclosed are an original and one (1) copy of the arti	cles of incorporation and a check for:
☐ \$70.00 ☐ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy & Certificate of Status
	ADDITIONAL COPY REQUIRED
FROM: John F. LEE Name	
_82 MARKET	Address
APALACHI City,	State & Zip
8 50 323 Daytime To	
	I for future annual report notification)

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

ARTICLES OF INCORPORATION

OF

RETSYO, INC.



The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE 1 - NAME

The name of the corporation shall be: RETSYO, INC.

ARTICLE II - PRINCIPAL OFFICE

The principal place of business of this corporation is 82 Market Street, Apalachicola, Florida 32320. The mailing address of this corporation shall be: P. O. Box 915, Apalachicola, Florida 32329.

ARTICLE III - SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: one hundred (100).

ARTICLE IV - DURATION

The period of its duration is perpetual.

ARTICLE V - PURPOSE

The purpose of this corporation is to engage in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE VI - CAPITAL STOCK

The corporation is authorized to issue one hundred (100) shares, all of one class, at no parvalue.

ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall have two (2) directors initially. The number of directors may be either increased or decreased from time to time by an amendment of the bylaws of the corporation in the manner provided by law, but shall never be less than one (1).

The names and addresses of the initial directors of this corporation are:

NAME

ADDRESS

JOHN F. LEE

82 Market Street

Apalachicola, FL 32320

BARBARA LEE

82 Market Street

Apalachicola, FL 32320



ARTICLE VIII - AMENDMENT OF ARTICLES

This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendment hereto, and any right conferred upon the shareholders is subject to this reservation.

ARTICLE IX - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is: JOHN F. LEE, 82 Market Street, Apalachicola, Florida 32320.

ARTICLE X - INCORPORATOR

The name and street address of the incorporator of these Articles of Incorporation are:

JOHN F. LEE, 82 Market Street, Apalachicola, Florida 32320.

The undersigned incorporator has executed these Articles of Incorporation this seventeenth day of June 2009.

Signature – JOHN F. LEE, Incorporator

STATE OF FLORIDA COUNTY OF FRANKLIN

BEFORE ME, the undersigned authority, personally appeared JOHN F. LEE, known to me to be the person who executed the foregoing Articles of Incorporation for the purposes therein stated.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 17th day of June 2009.

My Commission Expires:

KATHY R. SADLER
Commis OD0455391
Expres 7127/2009
Commis OD0455391
Expres 7127/2009

Signature of Notary Public

Printed, Stamped, or Typed Name of Notary

KATHY R. SADLER
Comm# D00455391
Expires 7/27/2009
Bonded thru (800)432-4284
Flonda Notary Assn., inc.



CERTIFICATE OF DESIGNATION OF

REGISTERED AGENT/ REGISTERED OFFICE

Pursuant to the provisions of Section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

- 1. The name of the corporation is: RETSYO, INC.
- 2. The name and address of the registered agent and office are:

JOHN F. LEE 82 Market Street Apalachicola, Florida 32320

Having been named as registered agent and to accept service of process for the above named corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

Date: 6/17/2009

John F. LEE, Registered Agent

STATE OF FLORIDA COUNTY OF FRANKLIN

BEFORE ME, the undersigned authority, personally appeared JOHN F. LEE, Registered Agent, known to me personally and known to be the person who executed the foregoing Certificate of Designation of Registered Agent/Registered Office, and he acknowledged before me that he executed this document for the purposes therein stated.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this seventeenth day of June 2009.

My Commission Expires:

KATHY R. SADLER
Comm# 0D0465391
Expires 7/27/2009
Bonded thru (800)432-4254
Fiorida Notary Assn., inc.

Signature of Notary Public

Printed, Typed, or Stamped Name of Notary