# P10000038393

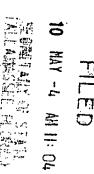
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
. (Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					





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# **COVER LETTER**

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

SUBJECT: R	TT MA	NAGEMENT , INC.		
		(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are a	ın orig	inal and one (1) copy of the art	icles of incorporation and	a check for:
☑ \$70 Filing		■ \$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	И: <u>RO</u>	NALD TÖRRES Name	e (Printed or typed)	
	5840 SW 8TH STREET , SUITE # 2			
		•	Address	
	MIA	MI, FL 33144	State & Zip	
		·	State & Zip	
	305	-266-7673		
		• Daytime 1	elephone number	
	dyna	astycaremedicalcenter@gmail.co	m	
			d for future annual report i	notification)

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:

RTT MANAGEMENT, INC.

### ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 5840 SW 8TH STREET

SUITE #2

MIAMI, FL 33144

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is: MANAGEMENT

## ARTICLE IV SHARES

The number of shares of stock is: 100

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

RONALD

5840 SW 8

PRESIDENT

**TORRES** 

STREET, SUITE 2,MIAMI, FL 33144

#### ARTICLE VI REGISTERED AGENT

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

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

**RONALD TORRES** 

5840 SW 8TH STREET, SUITE # 2

MIAMI, FL 33144

#### ARTICLE VII INCORPORATOR

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

**RONALD TORRES** 

5840 SW 8TH STREET, SUITE # 2

MIAMI, FL 33144

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

for famas a	04/29/2010
Signature/Registered Agent	Date
for famaya	04/29/2010
Signature/Incorporator	Date

O NA -4 MIN 05

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