P1100007583

(Re	questor's Name)	,
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



200208433122

06/10/11--01007--014 **87.50

11 JUI 26 PH 1: 09

),

1711-31989 PS7/27/11



June 13, 2011

DEVON M ROBINSON 6830 NE 150TH AVENUE WILLISTON, FL 32696

SUBJECT: RED WHITE & BLUES, INC.

Ref. Number: W11000031989

We have received your document for RED WHITE & BLUES, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6901.

Pamela Smith Regulatory Specialist II

www.sunbiz.org

Letter Number: 611A00014345

COVER LETTER

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

SUBJECT: Red White & Blues Fo.	rm	
(PROPOSED CORPORA)	TE NAME – <u>MUST INC</u>	UDE SUFFIX)
Enclosed are an original and one (1) copy of the artic	cles of incorporation an	d 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 & Certificate of
		Status
	ADDITIONAL C	OPY REQUIRED
	L	
FROM: Devon M. Robinson		
Name	(Printed or typed)	
6830 NE 150th Avenue	7,	
, and the second se	Address	
Williaton Floride 20000		
<u>Williston, Florida 32696</u>	State & Zip	
City,	State & Zip	
954-605-2783		
	elephone number	
droc42@hotmail.com	Confirmed and a	
E-mail address: (to be used	i ior iuture annuai repor	t noun ce mon)

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

ref# W11000031989

Att: Pamela Smith

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

	PRINCIPAL OFFICE			
	Principal street address	Mailing ad	dress, if different is:	
	6830 NE 150th Avenue			
	Williston Florida 32696	***********		
	PURPOSE r which the corporation is organized is:			
	y farm business			
	į			
APTICI E IV	SHARES			
	shares of stock is:100			
RTICLE V	INITIAL OFFICERS AND/OR DIRECTOR			
	Title: Devon M. Robinson, President			
Address:	6830 NE 150th Avenue			
	Williston, Florida 32696			
Nome en	i Title:	Name and Titles		
Address:				
Addiess.				
	d Title:			<u> </u>
Address:		Address:	,	<u>S</u>
				= 3
4 TO AND COLUMN TO STE		-,-		9 of C
	REGISTERED AGENT Florida street address (P.O. Box NOT acceptable)	. Cales we also weed a mount las		PX
Name:	Devon M. Robinson			I
Address:	6830 NE 150th Avenue			ŝ
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Williston, Florida 32696			6 PM 1: 08
ARTICIE VI	I INCORPORATOR			~ (
	address of the Incorporator is:			
	Diana A. Feli			
Name:	1241 SW Wellington Avenue	-		
Name: Address:				
	Port Saint Lucie, Florida 34953	<u></u>		
Address:	Port Saint Lucie, Florida 34953	 SS for the above stated corpo	pration at the place de	signated it
Address: Having been n	Port Saint Lucie, Florida 34953 amed as registered agent to accept service of proce I am familiar with and accept the appointment as re		eration at the place de ct in this capacity	signated i
Address: Having been n	Port Saint Lucie, Florida 34953 amed as registered agent to accept service of proce	ess for the above stated corporgistered agent and agree to a	ct in this capacity	signated i
Address: Having been n	Port Saint Lucie, Florida 34953 amed as registered agent to accept service of proce	ess for the above stated corporations and agree to a	June 6, 2011 Date	signated i
Address: Having been n his certificate,	Port Saint Lucie, Florida 34953 amed as registered agent to accept service of proce I am familiar with and accept the appointment as re Required Signature/Registered Agent locument and affirm that the facts stated herein as	gistered agent and agree to a	June 6, 2011 Date false information sub	
Address: daving been n his certificate, submit this d	Port Saint Lucie, Florida 34953 samed as registered agent to accept service of proce I am familiar with and accept the appointment as re Required Signature/Registered Agent	gistered agent and agree to a	June 6, 2011 Date false information sub	
Address: Having been n his certificate, submit this d	Port Saint Lucie, Florida 34953 amed as registered agent to accept service of proce I am familiar with and accept the appointment as re Required Signature/Registered Agent locument and affirm that the facts stated herein as	gistered agent and agree to a	June 6, 2011 Date false information sub	mitted in