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MRD/12

COVER LETTER

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

SUBJECT: A Ripple Effect Inc.			
(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an original and one (1) copy of the article	cles of incorporation and	l a check for:	
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
	ADDITIONAL CO	OPY REQUIRED	
FROM: Michael Speck and Associates, Inc. Name (Printed or typed)			
1912 B Lee Road, Suite A-1			
Orlando, FL 32810 City,	State & Zip		
407/521-8973 Daytime To	elephone number		
sueblandi@cfl.rr.com E-mail address: (to be used	for future annual report	notification)	

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

一种交流运动员

12 FEB -7 PH 4: 47

SECRETARY OF STATE TALLAHASSEE, FLORIDA



January 18, 2012

MICHEAL SPECK AND ASSOCIATES, INC. 1912 B LEE ROAD SUITE A-1 ORLANDO, FL 32810

SUBJECT: A RIPPLE EFFECT INC.

Ref. Number: W12000003179

We have received your document for A RIPPLE EFFECT INC. and your check(s) totaling \$78.75. 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.

Please return the corrected original and one copy of 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) 245-6879.

Ruby Dunlap Regulatory Specialist II New Filing Section

Letter Number: 712A00001258

FILED

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

<u>OF</u>

A RIPPLE EFFECT INC. OF VOLUSIA

I, the undersigned, being a natural person of legal age do hereby desire to form a corporation under the laws of the State of Florida, and do hereby adopt the following Articles of Incorporation

ARTICLE I

The name and address of the Corporation shall be:

A Ripple Effect Inc. Of Volusia 221 N. Causeway, Suite C New Smyrna Beach, FL 32169

ARTICLE II

This Corporation shall have the power to authorize and permit to engage in the practice of manufacturing, producing, importing, purchasing or otherwise acquiring, holding, owning, using, exporting, selling at wholesale, or otherwise dispose of equipment and supplies of any and all kinds and, permitted by laws or otherwise, its being the intention that this Corporation shall have the right to engage in any business or activity not expressly prohibited by applicable law of the State of Florida.

ARTICLE III

The maximum number of shares of stock of this Corporation which the Corporation if authorized to have outstanding at any one time is seventy-five thousand (75,000) share of common capital stock having par value of ten cents (\$.10) per share. The consideration to be paid for each share of stock shall be fixed by the Board of Directors of said Corporation.

ARTICLE IV

The street address of the initial registered office of this Corporation and the initial registered agent of this Corporation at this address is listed below:

Registered Agent

Address

Suzanne Blandi

221 N. Causeway, Suite C New Smyrna Beach, FL 32169

ARTICLE V

INITIAL BOARD OF DIRECTORS

The business of the Corporation shall be conducted and managed by the Board of Directors consisting of not less than one (1) members, as fixed from time to time by the bylaws of this Corporation and the Board of Directors shall be elected or appointed by the shareholders of the Corporation, but it shall not be necessary for any such director to be a shareholder of the Corporation.

The name and address of the first Board of Directors who shall not hold office until their successors are elected and qualified are:

NAME

ADDRESS

Suzanne Blandi

221 N. Causeway, Suite C New Smyrna Beach, FL 32169

ARTICLE VI

INCORPORATOR

The name and address of the persons signing these Articles of Incorporation are:

<u>NAME</u>

<u>ADDRESS</u>

Suzanne Blandi

221 N. Causeway, Suite C

New Smyrna Beach, FL 32169

FILED 12 FEB - 7 AM II: 58 SECRETARY DE STATE TALLAHASSEE, FLORIGA

ARTICLE VII

INDEMNIFICATION

Every director, officer, employee, or agent of the Corporation shall be indemnified by the Corporation against all expenses and liabilities including counsel fees, reasonably incurred or by reason of their being imposed upon him or her, in connection with any proceeding to which he or she may be made party or in which he or she may become involved by reasons of his or her employment or by reason of his or her being or have been a director, officer, employee or agent of the Corporation, or any settlement thereof, whether or not he or she is a director, officer, employee or agent at the time such expenses are incurred, except in such cases wherein the director, officer, employee or agent is adjudged liable negligence or misconduct in the performance of his or her duties as such director, officer, employee or agent.

The foregoing right of indemnification shall be in addition to and not exclusive of all other rights to which such director, officer, employee or agent may be entitled.

ARTICLE VIII

The Corporation reserves the right to amend, alter, change, repeal and revise any provisions of this Corporation's Articles of Incorporation in the manner now or hereinafter prescribed by the statute and all rights conferred on shareholders herein are granted subject to this reservation.

IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation on this Office day of whouse, 20 12.

Suzanne Blandi

STATE OF FLORIDA COUNTY OF VOLUSIA

BEFORE ME. The undersigned officer, personally appeared of personally known Suzanne

Blandi to me, who produced as identification, and personally appeared and known to me to be the person described in and who executed the foregoing Articles of Incorporation and he or she acknowledges the me that after

reading the same, the matter set forth therein are true and correct to the best of his or her knowledge and belief.

T. S. SLONES
MY COMMISSION # EE 039767
EXPIRES: November 30, 2014
Bonded Thru Notary Public Underwriters

Notary Public, State of Florida

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICIE

FOR THE SERVICE OF PROCESS WITHIN THIS STATE NAMING

UPON WHOM PROCESS MAY BE SERVED

In pursuance of Chapter 48.091, Florida Statutes, the following is submitted in compliance with said act.

First, the A Ripple Effect Inc. A colusion desiring to organize under the laws of the State of Florida with its principal office, as indicated in the Articles of Incorporation at the City of New Smyrna Beach , County of Volusia , State of Florida, has named Suanne Blandi located at 221 N. Causeway, Suite C , City of New Smyrna Beach, County of Volusia , State of Florida, as its agent to accept service of process within the State.

ACKNOWLEDGMENT: (Must be signed by designated agent.)

Having been named to accept service of process for the above stated Corporation, at the place designed in this Certificate, I hereby accept to act in this capacity, and agree to comply with provisions of said Act relative to keeping open said office.

Suzanne Blandi (Registered Agent)