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COVER LETTER ..

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

SUBJECT: Responsive Search In	C.	
(PROPOSED CORPOR	ATE NAME – <u>MUST INC</u>	LUDE SUFFIX)
Enclosed are an original and one (1) copy of the ar	ticles of incorporation an	nd 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 OPY REQUIRED
	ADDITIONAL C	OF T REQUIRED
FROM: Keith D. Hansel Nam	e (Printed or typed)	· · ·
8990 Mustang Island Ci	rcle	
	Address	
Naples, FL 34113	, State & Zip	
239-234-5878 Daytime	Telephone number	
keith@responsivesearch E-mail address: (to be use	n.com ed for future annual report	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 The name of the corp	NAME poration shall be: Responsive Search	Inc.	
ARTICLE II	PRINCIPAL OFFICE		
	Principal street address	Mailing ad	dress, if different is:
<u>32</u>	200 Bailey Lane		
	uite #115		
<u>N</u> a	ples, FL 34105		
ARTICLE III P	TIDDACE		
	ich the corporation is organized is:		
	e of the transaction of any and all	lawful nurnoses for whi	ch cornorations may be
	inder the laws of Florida.	lawiui puiposes loi willi	cir corporations may be
moorporated d	inder the laws of Florida.		
ARTICLE IV S The number of share			
	INITIAL OFFICERS AND/OR DIRECT		
Name and Titl	e:Keith D. Hansel, President	Name and Title:	
Address:	8990 Mustang Island Circle	Address:	
	Naples, FL 34113		
	· · · · · · · · · · · · · · · · · · ·		<u></u>
Nome and Titl	a: Kaith D. Hansal Country	Name and Title	
Address:	e:Keith D. Hansel, Secretary	Name and Title:	
Address:	8990 Mustang Island Circle Naples, FL 34113	Address:	
	Naples, FL 34113		
			
Name and Titl	e:	Name and Title:	
Address:		Address:	
			4
	REGISTERED AGENT		
Name:	da street address (P.O. Box NOT acceptable)	of the registered agent is:	[N
Address:	Keith D. Hansel		
Address:	8990 Mustang Island Circle		TS> 27
	Naples, FL 34 113		(A)
ARTICLE VII I	NCORPORATOR		O
	ess of the Incorporator is:		
Name:	Keith D. Hansel		المراجعين
Address:	8990 Mustang Island Circle	· 	
	Naples, FL 34113		₽₩ %
Having been namea	as registered agent to accept service of proc	ess for the above stated corpor	ration at the place designated in
	familiar with and accept the appointment as r	registerea agent ana agree to ac	- · · · · · · · · · · · · · · · · · · ·
K uth	D. Hansel		5/9/1z
	Required Signature/Registered Agent		Date
I submit this docum	ent and affirm that the facts stated herein a	ere true. I am aware that the f	alse information submitted in a
document to the Den	artment of State constitutes a third degree fel	onv as provided for in s.817 155	. F.S.
		, m province jor m mor/ilda	
Kia	D. Nousel		5/9/12 Date
. 1000	Required Signature/Incorporator		Date

Date