

P13000022055

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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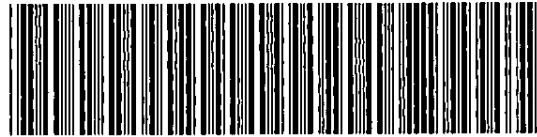
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
13 MAR 11 PM 4:15
SECRETARY OF STATE
TALLAHASSEE, FL 32310

T. Burch MAR 12 2013

COVER LETTER

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

SUBJECT: Red Wine Realty Advisors, Inc
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00
Filing Fee

☐ \$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: William Raabe
Name (Printed or typed)
3700 Galt Ocean Drive, #604
Address
Ft. Lauderdale, FL 33308
City, State & Zip
954-537-3344
Daytime Telephone number
willraabe@aol.com
E-mail address: (to be used 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 NAME

The name of the corporation shall be: Red Wine Realty Advisors, Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

3700 GALT Ocean Dr. #604
Ft. Lauderdale, FLA.
33308

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Consulting Services

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: William RAABE Name and Title: _____

Address 3700 Galt Ocean Dr. Address: _____

#604

Ft. Lauderdale, FL 33308

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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TALLAHASSEE

(conti.)

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: WILLIAM RAABE
Address: 3700 Galt Ocean Dr. #604
Ft. Lauderdale, FL 33308

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: WILLIAM RAABE
Address: 3700 Galt Ocean Dr. #604
Ft. Lauderdale, FL 33308

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TALLAHASSEE, FL 32399

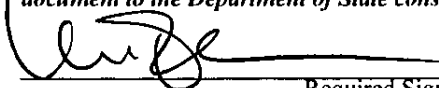
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent

03/08/2013
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



Required Signature/Incorporator

03/08/2013
Date

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SECRETARY OF STATE
FLORIDA

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Name and Title: William RAABE Name and Title: _____

Address 3700 Galt Ocean Dr. Address: _____

#604

Ft. Lauderdale, FL 33308

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

(cont.)

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

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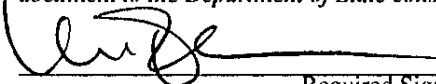
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