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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

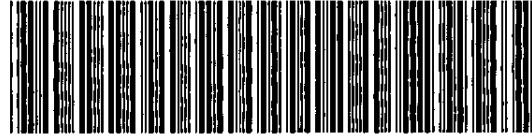
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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01/20/15--01026--003 **70.00

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15 JAN 20 PM 3.54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J 1/26/15

COVER LETTER

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

SUBJECT: _____

LoopRW, 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: _____

Randy Derisse
Name (Printed or typed)

455 NE 5th AVE Suite D321
Address

Delray Beach FL 33426
City, State & Zip

954.394.1489
Daytime Telephone number

Randy22@gmail.com
E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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:

LoopRW, Inc.

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ARTICLE II PRINCIPAL OFFICE

Principal street address

455 NE 5th AVE Suite D321

Mailing address, if different is:

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Delray Beach, FL 33426

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all lawful business.

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Randy Derisse, Owner

Name and Title:

Address

455 NE 5th AVE Suite D321

Address:

Delray Beach FL 33426

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

(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: Roudy Derisse
Address: 455 NE 5th AVE Suite D321
Delray Beach FL 33426

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Roudy Derisse
Address: 455 NE 5th AVE Suite D321
Delray Beach FL 33426

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

1/15/15
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

1/15/15
Date

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