

P 15000052491

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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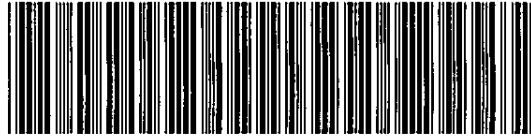
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
15 JUN 15 PM 3:30

6-18-15 Q

## COVER LETTER

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

SUBJECT: REAL Time Auction Method, 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: Andrew KAUFMAN  
Name (Printed or typed)

PO Box 3411  
Address

Ponte Vedra Beach, FL 32004  
City, State & Zip

(904) 825-1723  
Daytime Telephone number

ASK@RTAM.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: REAL TIME Auction Method, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2537 S. Ponte Vedra Blvd.

PO Box 3411

Ponte Vedra Beach, FL 32082

Ponte Vedra Beach FL  
32084

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To provide internet  
software to The Auction industry

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ARTICLE IV SHARES

The number of shares of stock is: 10

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>Andrew KAUFMAN, President</u>	Name and Title:	<u>Treasurer Secretary</u>
Address	<u>2537 S. Ponte Vedra Blvd</u>	Address:	<u>&amp; CHAIRMAN of</u>
	<u>Ponte Vedra Beach, FL</u>		<u>The board</u>
	<u>32082</u>		

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

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: Andrew KAUFMAN

Address: 2537 S. Ponte Vedra Blvd.  
Ponte Vedra Beach, FL 32082

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Andrew KAUFMAN

Address: 2537 S. Ponte Vedra Blvd.  
Ponte Vedra Beach, FL 32082

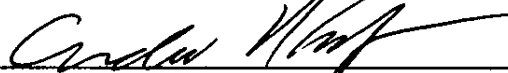
**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: July 1, 2015 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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

6-12-15

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

6-12-15

Date