

**PISOW 9902**

Division of State  
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**FLORIDA PROFIT/NON PROFIT CORPORATION  
RUSSELL KNOX, INC.**

Certificate of Status	0
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DEC 14 2015

T. SCOTT

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## COVER LETTER

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

**SUBJECT:** RUSSELL KNOX, 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      ☐ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                                    & Certificate of  
                                    Status

**ADDITIONAL COPY REQUIRED**

**FROM:** THOMAS BERTSCH

Name (Printed or typed)

6060 PARKLAND BLVD., SUITE 100

Address

CLEVELAND, OH 44124

City, State & Zip

2169168420

Daytime Telephone number

TOM@FSMCAP.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: RUSSELL KNOX, INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

6060 PARKLAND BOULEVARD

SUITE 100

CLEVELAND, OH 44124

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: TO ENGAGE IN ANY AND ALL LAWFUL BUSINESS ACTIVITY  
FOR WHICH A CORPORATION MAY BE FORMED UNDER THE FLORIDA BUSINESS CORPORATION ACT

**ARTICLE IV SHARES**

The number of shares of stock is: 1000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: RUSSELL KNOX - PRESIDENT

Address: 6060 PARKLAND BLVD, SUITE 100  
CLEVELAND, OH 44124

Name and Title: ANDREA HERNANDEZ - SECRETARY

Address: 6060 PARKLAND BLVD, SUITE 100  
CLEVELAND, OH 44124

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: CT Corporation System  
Address: 1200 S Pine Island Road  
Plantation, FL 33324

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: THOMAS BERTSCH  
Address: 6060 PARKLAND BLVD., SUITE 100  
CLEVELAND, OH 44124

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 1/1/2016 (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*

April Wittenwyler, Asst. Secretary



12/11/2015

Required Signature/Registered Agent

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.*

~~THOMAS BERTSCH~~

12/11/2015

Required Signature/Incorporator

Date