

12/28/2015/TUE 04:09 PM

12/28/2015

FAX

Printed

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H15000304545 3)))



H150003045453ABC.

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.
Account Number : 120000000146
Phone : (305)444-4994
Fax Number : (305)444-4977

15 DEC 29 AM 9:42
FLORIDA
DIVISION OF
CORPORATIONS
TALLAHASSEE, FLORIDA

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION

RED CARPET 1 READY, INC.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

RECEIVED
15 DEC 29 PM 3:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

12/30

DEC/29/2015/TUE 04:09 PM

FAX No.

P. 002

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 Carpet 1 Ready, Inc.*

ARTICLE II PRINCIPAL OFFICE

Principal street address
*550 NIN 58 AVE
CORAL SPRINGS, FL 33067*

Mailing address, if different is:

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: *KIERA A. RIVERA* Name and Title: *Pres. / Sec.*
Address: *550 NIN 58 AVE* Address: *550 NIN 58 AVE*

CORAL SPRINGS, FL 33067

Name and Title: *SCOTT A. ZUCKERMAN, V. Pres.* Name and Title: *V. Pres.*
Address: *550 NIN 58 AVE* Address: *550 NIN 58 AVE*

CORAL SPRINGS, FL 33067

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: *SCOTT A. ZUCKERMAN*
Address: *25571 Bambra Circle, Suite 500*
CORAL SPRINGS, FL 33067

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: *SCOTT A. ZUCKERMAN*
Address: *550 NIN 58 AVE*
CORAL SPRINGS, FL 33067

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.

EJ

Required Signature/Registered Agent

12/23/2015

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.

EJ

Required Signature/Incorporator

12/23/2015

Date