

12/29/2015/TUE 04:09 PM

12/28/2015

FAX #  
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 DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

**\*\*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

MD 12/30

**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

5528 NW 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. RIVERAAddress: 5528 NW 58 AVE.CORAL SPRINGS, FL 33067Name and Title: Pres./Sec.

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

Name and Title: SCOTT A. ZUCKERMANAddress: 5528 NW 58 AVE.CORAL SPRINGS, FL 33067

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

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

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

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

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

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

**ARTICLE VI REGISTERED AGENT**

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

Name: EDWARD J. JORDANAddress: 255 HILHAMBER CIRCLE, SUITE 500CORAL GABLES, FL 33134**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: SCOTT A. ZUCKERMANAddress: 5528 NW 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

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.

Required Signature/Incorporator

Date