

P17000081583

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

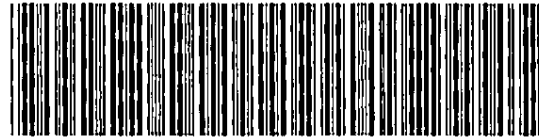
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200304242852

10/10/17--01020--007 **78.75

17 OCT 10 PM 2:11
RECEIVED BY
ALL AMESSEE. FLORENCE

OCT 11 2017

K. Brumbley

COVER LETTER

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

SUBJECT: RIDGE CONNECTIONS 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: ANDRE EDWARDS
Name (Printed or typed)

1410 NW 192nd STREET
Address

MIAMI, FL 33169
City, State & Zip

754-422-2465
Daytime Telephone number

cinije@yahoo.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 RIDGE CONNECTIONS INC.

The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE

Principal street address
1410 NW 192nd STREET

MIAMI, FL. 33169

Mailing address, if different is:
SAME AS PRINCIPAL ADDRESS.

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Networking of cable services.

ARTICLE IV SHARES 500 shares @\$1.00 per share.

The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Andre Edwards - President

Address 1410 NW 192nd Street
Miami, FL. 33169

Name and Title: _____

Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

FILED
17 OCT 10 PM 2:11
CLERK OF DISTRICT COURT
MIAMI, FLORIDA

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: Charles Inije
Address: 1175 N.E. 125 Street suite 306
Miami, FL 33161

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Andre Edwards
Address: 1410 NW 192nd Street
Miami, FL 33169

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 10/02/2017 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 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
10/03/2017
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
10/03/2017
Date