## 

| (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: |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |





04/24/13--01012--002 \*\*78.75



## **COVER LETTER**

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

| SUBJECT: Re  | D FORTRESS Pro                             | nerty MAMAGE                          | ment. Lo.               |  |  |
|--|--|---------------------------------------|-------------------------|--|--|
|  | (PROPOSED CORPORA                          | TE NAME – MUST INCL                   | UDE SUFFIX)             |  |  |
| Enclosed are an orig   | final and one (1) copy of the art          | icles of incorporation an             | d a check for:          |  |  |
| ☐ \$70.00<br>Filing Fee  | \$78.75 Filing Fee & Certificate of Status | ☐ \$78.75 Filing Fee & Certified Copy | & Certificate of Status |  |  |
|  | ADDITIONAL COPY REC                        |                                       | OPY REQUIRED            |  |  |
| FROM:  | MICHAEZ MCVO<br>Name<br>2525 PARKWAY       |                                       |                         |  |  |
|  |  | Address                               |                         |  |  |
|  | Fort Myers,                                | FC 33701<br>State & Zip               |                         |  |  |
|  | 239 - 939 - 18<br>Daytime T                |                                       |                         |  |  |
|  | MIKE @ IZEALTYS                            | EXVICESPM. CO                         |                         |  |  |
| 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 corporati  | on shall be: RED                   | FORTRESS             | PIZOPEDZTY MI | ANAGEMENT CO.   |
|---|------------------------------------|----------------------|---------------|---|
| 2525 PARFW  | Principal street address           | <u> </u>             | Mailin        | ng address, if different is:                            |
| ARTICLE III PURPO. The purpose for which the  | SE e corporation is organize ATE   |                      |               | CEMENT OF   |
|   |                                    |                      |               |   |
| ARTICLE IV SHARE The number of shares of s  ARTICLE V INITIAL  Name and Title:  Address | tock is: 3C                        | directors<br>Vety, P |               | 2019 APR 24 AM 8: 58 SECRETARY OF STATE TALLAHASSEE, FL |
| Address   | JUN MOVE<br>2525 PARI<br>FORT MYEN | EWAY ST              | Address:      |   |
| Name and Title:_ Address  |                                    |                      | Address:      |   |

| Name and                                    | Title:  | Name and Title:  |   |
|---|---|--|---|
| Address                                     |   | Address:   |   |
|   |   | <u> </u>   |   |
|   |   |  |   |
|   |   |  |   |
|   | EGISTERED AGENT<br>ida street address (P.O. Box NOT acceptable) o   | of the registered agent is:                                    |   |
|   |   |  |   |
| Address:                                    | JON MCVETY  25:25 PARKWAY ST  FORT MYESS, FL 3390   | _  |   |
| -   | FORT MYESTS, FL 3390  | 21   |   |
| ARTICLE VII IN                              | CORPORATOR  |  | 2019 APR 24<br>SECRE LAHA                                 |
| The name and add                            | ress of the Incorporator is:  |  | PR 2  |
| Name:                                       | MICHAER MCVETY<br>2525 PARKWAY ST   | _  | 24 AM 8: 58<br>PHASSEE, FL                                |
| Address:                                    | 2525 PARKWAY ST   | _  | ASSEE, FL   |
|   | FURT MYERS, FL 339  | 01<br>-  | FL FATE   |
| Effective date, if ot                       | FFECTIVE DATE: ther than the date of filing: te is listed, the date must be specific and cannot           | . (OPTIONAL<br>ot be more than five days p                     | )<br>rior or 90 days after the                            |
|   | serted in this block does not meet the applicable ctive date on the Department of State's records.        | statutory filing requirement                                   | s, this date will not be listed as                        |
| Having been named<br>this certificate, I am | d as registered agent to accept service of process<br>from familiar with and accept the appointment as re | s for the above stated corpor<br>gistered agent and agree to a | ration at the place designated in<br>act in this capacity |
|   | Required Signature/Registered Agent   |  | 4/19/19<br>Date   |
|   |   |  | Date  |
| I submit this docum<br>document to the De   | nent and affirm that the facts stated herein are<br>partment of State constitutes a third degree felor    | true. I am aware that the f<br>iy as provided for in s.817.1.  | alse information submitted in a 55, F.S.                  |
|   | mmyutu  |  | 4/19/19   |
| Required                                    | l Signature/Incorporator  | <del></del>  | Date  |

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