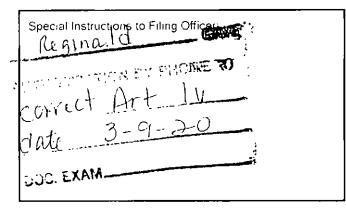
P20000020652

	(Requestor's Name)
	,
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-U	P WAIT MAIL
	(Business Entity Name)
<u>-</u>	(Document Number)
Certified Copies	Certificates of Status



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SECRETAL OF STATES

COVER LETTER

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

	NT Enterprises, Inc TENAME-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	S78.75 S87.50 Filing Fee Filing Fee, & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED				
FROM: Regimed Ramon Edwards Name (Printed or typed) 17611 July for Oaks Drive Address					
Jacksonville FL 32223 City, State & Zip					

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: RE	VANT ENTERE	PRISES INC.
ARTICLE II PRINCIPAL OFFICE Principal street address 17 bell July to Daks Vrive	s	Mailing address, if different is:
Jacksonville, FL 322.23	<u> </u>	
ARTICLE III PURPOSE The purpose for which the corporation is organ	nized is: Business Co	insulding Work
		SECRET
		<u> </u>
ARTICLE IV SHARES The number of shares of stock is: 5		MHID: 35
Name and Title: Region of R.		itle:
<u> </u>	for Caks Dive Address:	
Name and Title La Teell H	- Vice Preside	itle:
	In Oaks Dr. Address:	
Name and Title:	Name and T	itle:
	Address:	

Name and Title:	Name and Title:	
Address	Address:	
ARTICLE VI REGISTERED A	GENT	
The name and Florida street addr	ess (P.O. Box NOT acceptable) of the registered agent is:	
Name: Regional	R. Cilwants	2020 SEC
Address: [26]	Julington Oaks Drive	2020 MAR SECRET
Jacksonul	1., 16 32223	
ARTICLE VII INCORPORATO	<u>PR</u>	AHIO: 35
The name and address of the Incor	porator is:	프됨 35
Name: Reginale	Julington Caks Drive	ניו
Address:	Ichnelon Cake Drive	
Jack so.	MIL, FL 32273	
ARTICLE VIII EFFECTIVE D.	ATE:	
Effective date, if other than the dat (If an effective date is listed, the filing.)	c of filing: (OPTIONAL) date must be specific and cannot be more than five days prior	or 90 days after the
•	lock does not meet the applicable statutory filing requirements, the	is date will not be listed as
the document's effective date of the	ic trepartitetit or state s records.	
	gent to accept service of process for the above stated corporation as accept/the appointment as registered agent and agree to act in this	
Recult Kann	d Signature/Registered Agent	3-6-2020
Required	d Signature/Registered Agent	Date
	that the facts stated herein are true. I am aware that the false	
accument to the Department of Sta	te constitutes a third degree felony as provided for in s.817.155, F.	
Tool Kann	Sh	3-6-2020
Required Signature/Incorporator	Date	