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	(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	o Filing Officer:	
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Office Use Only



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FLORIDA CAPITAL COURIER SERVICES, INC 2330 CLARE DRIVE TALLAHASSEE, FL 32309 (850) 524-5437 (850) 524-6243

(Business Name)	Document #
(Business Ivano)	is of dimens in
Walk in	Pick up time
Mail out	Will wait
Photocopy	
Certified Copy (please stamp each	page) Articles of Organization
Certificate of Status	
NEW FILINGS	<u>AMMENDMENTS</u>
Profit	Amendment
Not for Profit	Resignation of R.A. Officer/Director
Limited Liability	_ Change of Registered Agent Dissolution/Withdrawal
Domestication Other	Merger
Other _X_ CORP	Conversion
OTHER FILINGS	REGISTERATION/QUALIFICATIONS
Annual Report	Foreign filing Limited Partnership
Fictitious Name	Reinstatement
APOSTIL()	Other

COVER LETTER

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

SUBJECT: Kile	o Reedy Creek, Inc.		
	(PROPOSED CORPO	DRATE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u>)
Enclosed are an orig	ginal and one (1) copy of the	articles of incorporation and	l a check for:
	☐ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee. Certified Copy & Certificate of
		ADDITIONAL CO	Status
FROM: <u>_</u>	Adrian Brion on behalf of N	The National Incorporation ame (Printed or typed)	on Network Inc.
4	1440 PGA Blvd., Suite 30	08	
		Address	
	<u>Palm Beach Gardens, FL</u>	. 33410 City, State & Zip	
	561-352-0602 Daytin	ne Telephone number	
	adrian@theincnetwork.co E-mail address: (to be	om used for future annual report i	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)

	<u>CIPAL OFFICE</u>		
728 Maior Blvd	Principal <u>street</u> address Suite 510	Mailing	address, if different is:
Orlando, FL 32	819		
RTICLE III PURP			
ne purpose for which	the corporation is organized is: Real E	state Investing	
			
			žož
			8: 49 5 TATE
RTICLE IV SHAF	<u>RES</u> f stock is: 10,000 shares at \$1.00 pa	ar valua	. w a
ie number of shares o	1 Stock 15. 10,000 dilays at \$1,00 pc		
RTICLE V INITI	AL OFFICERS AND/OR DIRECTORS		
Name and Tit	le: Brendon Brown Director	Name and Title:	
Addroce	5728 Maior Blvd., Suite 510	Address:	
Address	5728 Major Blvd., Suite 510	Address:	
Address	5728 Major Blvd., Suite 510 Orlando, FL 32918	Address:	
Address		Address:	
	Orlando, FL 32918		
Name and Title	Orlando, FL 32918 E. Kevin Harris Director	Name and Title:	
	Orlando, FL 32918	Name and Title:	
Name and Title	Orlando, FL 32918 E. Kevin Harris Director	Name and Title: Address:	
Name and Title	Orlando, FL 32918 E: Kevin Harris Director 5728 Major Blvd., Suite 510	Name and Title: Address:	
Name and Title	Orlando, FL 32918 E: Kevin Harris Director 5728 Major Blvd., Suite 510 Orlando, FL 32819	Name and Title: Address:	
Name and Title Address	Orlando, FL 32918 E: Kevin Harris Director 5728 Major Blvd., Suite 510 Orlando, FL 32819	Name and Title: Address:	
Name and Title Address	Orlando, FL 32918 E: Kevin Harris Director 5728 Major Blvd., Suite 510 Orlando, FL 32819	Name and Title: Address: Name and Title:	

Name and	Title:	Name and Title:	
• Address		Address:	
			
			
	EGISTERED AGENT rida street address (P.O. Box NOT acceptable	e) of the registered agent is:	<u></u>
Name:	Baldwin Accounting, CPA, P.A.	·	, i
Address:	5728 Major Blvd., Suite 510		- نہر <u>ا</u>
	Orlando, FL 33410		89 III
. DELCHELLI	N.CORDOR ATOR		AH 8: 49 OF STATE SSEE, FL
ARTICLE VII L	-		FATE 49
	Iress of the Incorporator is:	.1_4:1	Alabaada Ina
Name:	Adrian Brion on behalf of The N	<u>vati</u> onal incorporation	Network Inc.
Address:	4440 PGA Blvd., Suite 308		
	Palm Beach Gardens, FL 334	10_	
ARTICLE VIII	<u>EFFECTIVE DATE:</u>		
Effective date, if o	ther than the date of filing:	. (OPTION	AL)
filing.)	te is instea, the date must be specific and ca	imot ik more than nie day	ya prior or 70 days and inc
	nserted in this block does not meet the applic		nents, this date will not be listed
the document's en	ective date on the Department of State's reco	rus.	
Having been name certificate, I am fa	ed as registered agent to accept service of proce miliar with and accept the appointment as reg	ess for the above stated corpo- istered agent and agree to ac	ration at the place designated in . t in this capacity
Todd Bo	rldwin		03/08/2022
	Required Signature/Registered Agent		Date
I submit this docu document to the D	ment and affirm that the facts stated herein epartment of State constitutes a third degree f	are true. I am aware that the	se false information submitted i 7.155, F.S.
Adrian a			03/08/2022
Required Signatur			Date