

P24000003354

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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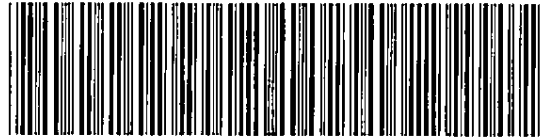
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2024 JAN 19 PM 3:55

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ALABAMA

SECRETARY OF REVENUE

COVER LETTER

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

SUBJECT: Rise Realty Advisors, 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: Derek Ratliff
Name (Printed or typed)
210 Caribbean Place
Address
St. Johns, FL 32259
City, State & Zip
386-438-9355
Daytime Telephone number
derek.ratliff@riserealtyadvisors.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

The name of the corporation shall be: Rise Realty Advisors, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

210 Caribbean PL St. Johns, FL 32259

SAME

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Real Estate business

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Derek Ratliff, President

Name and Title: _____

Address 210 Caribbean PL

Address: _____

St. Johns, FL 32259

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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CLERK OF DISTRICT COURT
JACKSONVILLE, 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: Vickie Ratliff

Address: 14859 SE County Road 137

Jasper, FL 32052

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JASPER, FL

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Vickie Ratliff

Address: 14859 SE County Road 137

Jasper, FL 32052

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: January 15, 2024. (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

Vickie L. Ratliff
Required Signature/Registered Agent

January 19, 2024

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.

Vickie L. Ratliff
Required Signature/Incorporator

January 19, 2024

Date