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1(Co	rporation Name)	(Document #)	95	
4	rporation Name)	(Document #) (Document #)	FILED 57	
	Pick up time Will wait AMENDMEN	Photocopy	ertified Copy ertificate of Status	
Profit NonProfit Limited Liability Domestication	Change of Registe Dissolution/Withd			
OTHER FILINGS Annual Report Fictitious Name	REGISTRA QUALIFIC Foreign	TION/- ATION-		
Name Reservation	Limited Partnership Reinstatement Trademark		no prin adduss	

110 R.1 DES W96-26507 Examiner's Initials 12/26/96

Other



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

December 17, 1996

BRETT SOETY 1200 BELLE AVE. SUITE 101 WINTER SPRINGS, FL 32708

SUBJECT: RED BRIDGE, INC. Ref. Number: W96000026507

We have received your document for RED BRIDGE, INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The articles of incorporation must be prepared in compliance with section 607.0202, Florida Statutes. Please refer to this section of the law.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6067.

Neysa Culligan Document Specialist

Letter Number: 296A00056251

TRANSMITTAL LETTER

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

SUBJECT: Red R	ridge. Inc.			
		name - must include suf	fix)	
Enclosed is an origina for:	I and one (1) co	py of the articles of	Incorporation a	nd a check
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 * Filing Fee & Certified Copy Additional Copy	\$131.25 Filing Fee, Certified Copy & Certificate Required	*previously sent and received.
FROM:	Brett (O. Soety	···	
	Name (printed or typed)			
1200 Belle Avenue, Suite 101				
		Address		
	Winter	Winter Springs, FL 32708		
	City, State & Zip			
	(407) 696–4334			
	Daytime Telephone number			

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Red Bridge, Inc.

FILED

96 RC 24 M 8 5

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

1200 Belle Avenue, Suite 101 Winter Springs, FL 32708

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

One hundred (100)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Brett O. Soety 1200 Belle Avenue, Suite 101 Winter Springs, FL 32708

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

John J. Soety, 827 Live Oak Lane, Oviedo, FL 32765 Brett O. Soety, 1950 Aladdin Court, St. Cloud, FL 34771

The undersigned incorporator(s) has(have) executed these Articles of Incorporation t
23rd day of December , 19 95 .
(An additional article must be added if an effective date is requested.)
W.A.
Signature Signature

Notarization is not required

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

2. The name and ac	ddress of the registered agent and office is:			-
	Brett O. Soety (NAME)		96 DE	
	1200 Belle Avenue, Suite 101 (P.O. Box or Mail Drop Box NOT ACCEPTABLE)		C 24 .::	
	Winter Springs, FL 32708 (CHY/STATE/ZIP)		9 57	<u> </u>
corporation at the pagent and agree to	d as registered agent and to accept service of process for sace designated in this certificate, I hereby accept the appoint act in this capacity. I further agree to comply with the provision and complete performance of my duties, and I am familiar w	nent as regions of all	gistere statut	ed es

obligations of my position as registered agent.

12/23/96

(DATE)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314