

P11000032776

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

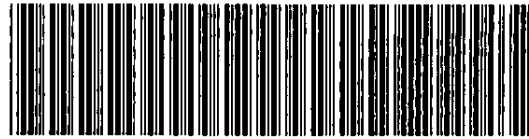
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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**COVER LETTER**

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

**SUBJECT: Reellyfe Rentals & Leasing Company**  
**(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)**

**Enclosed are an original and one (1) copy of the articles of incorporation and a check for:**

- |                               |                                     |                                  |   |
|-------------------------------|-------------------------------------|----------------------------------|---|
| <input type="checkbox"/> \$75 | <input type="checkbox"/> \$78.75    | <input type="checkbox"/> \$78.75 | <input checked="" type="checkbox"/> \$87.50 |
| <b>Filing Fee</b>             | <b>Filing Fee</b>                   | <b>Filing Fee</b>                | <b>Filing Fee,</b>                          |
|                               | <b>&amp; Certificates of Status</b> | <b>&amp; Certified Copy</b>      | <b>Certified Copy</b>                       |
|                               |                                     |                                  | <b>&amp; Certificate of</b>                 |
|                               |                                     |                                  | <b>Status</b>                               |

**ADDITIONAL COPY REQUIRED**

**FROM: Shirley Wells**

**Name (Printed or typed)**

12100 S.W 43<sup>rd</sup> St. Rd.

**Address**

Ocala, FL 34481

**City, State & Zip**

(352) 299-4577

**Daytime Telephone number**

**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)

**ARTICLES I NAME**

The name of the corporation shall be:  
Reellyfe Rentals & Leasing Company

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:  
12100 SW 43<sup>rd</sup> St. Rd.  
Ocala, FL 34481

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REELLYFE RENTALS & LEASING COMPANY  
CORPORATION  
FLORIDA

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
To be regularly engaged in the business of leasing, renting, and selling electronics.

**ARTICLE IV SHARES**

The number of shares of stock is:  
2000 Two Thousand Shares at par value

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):  
Shirley Wells - CFO & Treasurer

**ARTICLE VI REGISTERED AGENT**

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Shirley Wells  
12100 S.W. 43<sup>rd</sup> St. Rd.  
Ocala, FL 34481

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Shirley Wells  
12100 S.W. 43<sup>rd</sup> St. Rd.  
Ocala, FL 34481

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STATE OF FLORIDA  
SECRETARY OF STATE

\*\*\*\*\*

*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.*

  
\_\_\_\_\_  
Signature/Registered Agent

3/30/11  
Date

  
\_\_\_\_\_  
Signature/Incorporator

3/30/11  
Date