

F11000004987

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

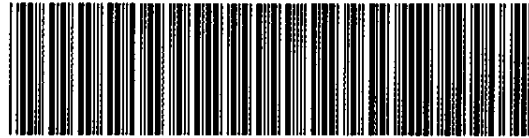
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12/05/11--01044--003 \*\*78.75

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

11 DEC 12 AM 3:48

APPROVED  
AND  
FILED

*1/11*

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Rabache Associates Inc

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Jayne Rabache

Name of Person

Rabache Associates Inc

Firm/Company

8650 So Ocean Drive PH 5

Address

Jensen Beach, FL 34957-2154

City/State and Zip code

rabache@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jayne Rabache

Name of Person

at ( 772 ) 229-1563

Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

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

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee

☒ \$78.75 Filing Fee &  
Certificate of Status

☐ \$78.75 Filing Fee &  
Certified Copy

☐ \$87.50 Filing Fee,  
Certificate of Status &  
Certified Copy



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 6, 2011

JAYNE RABACHE  
8650 SO OCEAN DRIVE PH 5  
JENSEN BEACH, FL 34957-2154

SUBJECT: RABACHE ASSOCIATES INC.  
Ref. Number: W11000061156

We have received your document for RABACHE ASSOCIATES INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

The registered agent must sign accepting the designation.

Please return the corrected original and one copy of 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 (850) 245-6962.

Valerie Herring  
Regulatory Specialist II  
New Filing Section

Letter Number: 311A00027317

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. Rabache Associates Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. New York

(State or country under the law of which it is incorporated)

3. 13-3162568

(FEI number, if applicable)

4. 04/28/1982

(Date of incorporation)

5. "Perpetual"

(Duration: Year corp. will cease to exist or "perpetual")

6. \_\_\_\_\_

(Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 8650 So Ocean Drive, Jensen Beach, FL 34957

(Principal office address)

8650 So Ocean Drive, Jensen Beach, FL 34957

(Current mailing address)

8. Real estate broker

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name:

JAYNE RABACHE

Office Address:

8650 S OCEAN DR. PH 5

JENSEN BEACH

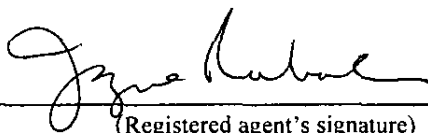
(City)

, Florida 34957

(Zip code)

10. **Registered agent's acceptance:**

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*



(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11 DEC 12 AM 2:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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12. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: Jayne Rabache

Address: 8650 So Ocean Drive PH 5  
Jensen Beach, FL 34957-2154

11 DEC 12 AM 9:48

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: Jayne Rabache

Address: 8650 So Ocean Drive PH5  
Jensen Beach, FL 34957-2154

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. \_\_\_\_\_

*Jayne Rabache, Pres.*

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that 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.

14. Jayne Rabache, President

(Typed or printed name and capacity of person signing application)

**State of New York**  
**Department of State** } ss:

APPROVED  
AND  
FILED

11 DEC 12 AM 9:48

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I hereby certify, that the Certificate of Incorporation of RABACHE ASSOCIATES, INC. was filed on 04/28/1982, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

The Biennial Statement is past due.



\*\*\*

*WITNESS my hand and the official seal  
of the Department of State at the City of  
Albany, this 17th day of November two  
thousand and eleven.*

*First Deputy Secretary of State*