

F20000005011

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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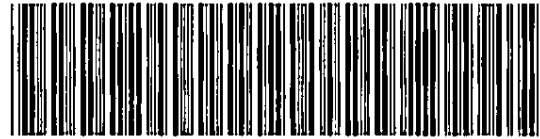
(Business Entity Name)

(Document Number)

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

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NOV 05 2020  
T. L. LEMMON

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Ray Rapchak Holdings Incorporated

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:

Richard Green

Name of Person

Lewis Longman Walker

Firm/Company

100 Second Ave South, Suite 501-S

Address

St. Petersburg, FL 33701

City/State and Zip code

LisaRapchak@gmail.com

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

For further information concerning this matter, please call:

Richard Green

at ( 727 )

245-0820

Name of Person

Area Code

Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**MAILING ADDRESS:**

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

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$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

**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. RAY RAPCHAK HOLDINGS INCORPORATED

(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. INDIANA

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

3. 20-4601247

(FEI number, if applicable)

4. 03/17/2006

(Date of incorporation)

5. \_\_\_\_\_

(Date of duration, if other than 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. 13244 BARNEGAT LANE, FISHERS IN 46055

(Principal office street address)

11650 OLIO RD, STE 1000-353, FISHERS IN 46037

(Current mailing address, if different)

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

Name: RICHARD GREEN

Office Address: 100 Second Ave South, Suite 501-S

St. Petersburg

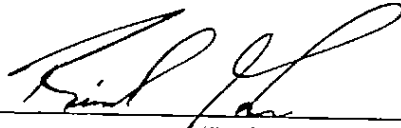
(City)

, Florida 33701

(Zip code)

9. 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)

10. 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. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

**A. DIRECTORS**

☐ Chairman Name: Ray Rapchak  
☐ Vice Chairman Address: 13244 Barnegat Lane  
☐ Director Fishers, IN 46055  
☒ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

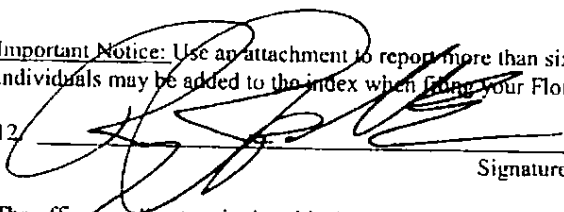
☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

**Important Notice:** Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

12.  \_\_\_\_\_  
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 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.

13. Ray Rapchak, President  
(Typed or printed name and capacity of person signing application)

**State of Indiana**  
**Office of the Secretary of State**  
**Certified Copies**

To Whom These Presents Come, Greeting:

I, CONNIE LAWSON, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that this is a true and complete copy of this 5 page document consisting of the following records filed in this office:

Certification Date: October 28, 2020  
Business Name: RAY RAPCHAK HOLDINGS, INC.  
Business ID: 2006032700765

Transaction	Date Filed	No. of pages
Articles of Incorporation	03/17/2006	3
Business Entity Report	09/28/2020	2
Total No. of pages		5



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, October 28, 2020

*Connie Lawson*

CONNIE LAWSON  
SECRETARY OF STATE

2006032700765 / 13177467

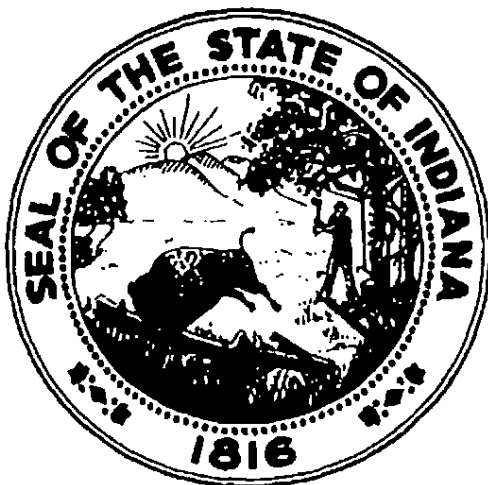
All certificates should be validated here: <https://bsd.sos.in.gov/ValidateCertificate>  
Expires on November 27, 2020.

**State of Indiana  
Office of the Secretary of State**

**CERTIFICATE OF INCORPORATION  
of  
RAY RAPCHAK HOLDINGS, INC.**

I, TODD ROKITA, Secretary of State of Indiana, hereby certify that Articles of Incorporation of the above For-Profit Domestic Corporation have been presented to me at my office, accompanied by the fees prescribed by law and that the documentation presented conforms to law as prescribed by the provisions of the Indiana Business Corporation Law.

NOW, THEREFORE, with this document I certify that said transaction will become effective Friday, March 17, 2006.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, March 17, 2006.

A handwritten signature in black ink that reads "Todd Rokita".

TODD ROKITA,  
SECRETARY OF STATE

2006032700765 / 2006032748938

**ARTICLES OF INCORPORATION**

State Form 4159 (R12/1-03)

Approved by State Board of Accounts 2003

200603280765

**INSTRUCTIONS**

Use 8 1/2" x 11" white paper for attachments

Present original and one copy to address in upper right corner of this form

Please TYPE or PRINT.

Please visit our office on the web at [www.sos.in.gov](http://www.sos.in.gov)

Indiana Code 23-1-2-1-1

FILING FEE: \$50.00

**ARTICLES OF INCORPORATION**

The undersigned, desiring to form a corporation (hereinafter referred to as "Corporation") pursuant to the provisions of

☒ Indiana Business Corporation Law☐ Indiana Professional Corporation Act 1983, Indiana Code 23-1-5-1-1, et seq. (Professional corporations must include Certificate of Registration)

As amended, executes the following Articles of Incorporation:

**ARTICLE I - NAME AND PREVIOUS EXISTENCE**

Name of Corporation (the name must include the word "Corporation", "Incorporated", "Limited", "Company" or an abbreviation thereof)

Ray Rapchak Holdings, Inc.

Principal Office

Post office address

709 Courtney Drive

City

Crown Point

State

IN

ZIP Code

46307

**ARTICLE II - REGISTERED OFFICE AND AGENT**

Registered Agent. The name and street address of the Corporation's Registered Agent and Registered Office for service of process are

Name of Registered Agent

Raymond Rapchak

Address of Registered Office (street or building)

709 Courtney Drive

City

Crown Point

Indiana

ZIP Code

46307

**ARTICLE III - AUTHORIZED SHARES**Number of shares the Corporation is authorized to issue 1,000

If there is more than one class of shares, shares with rights and preferences, list such information as "FUND A"

**ARTICLE IV - INCORPORATORS**

(the name(s) and address(es) of the incorporator(s) of the corporation)

NAME	NUMBER AND STREET OR BUILDING	CITY	STATE	ZIP CODE
Raymond Rapchak	709 Courtney Drive	Crown Point	IN	46307

In Witness Whereof, the undersigned being all the incorporators of said Corporation execute these Articles of Incorporation and verify, subject to penalties of perjury, that the statements contained herein are true.

this \_\_\_\_\_ day of \_\_\_\_\_, 20 06

Signature of incorporator	Printed name
	Raymond Rapchak
Signature of incorporator	Printed name
Signature of incorporator	Printed name

This instrument was prepared by (name)

Bruce A. Lambka

Address (number, street, city and state)

120 1/2 South Main Street, Crown Point, IN

ZIP Code

46307

APPROVED AND FILED  
CONNIE LAWSON  
INDIANA SECRETARY OF STATE  
09/28/2020 01:04 PM

**BUSINESS ENTITY REPORT**

**NAME AND PRINCIPAL OFFICE ADDRESS**

BUSINESS ID 2006032700765  
BUSINESS TYPE Domestic For-Profit Corporation  
BUSINESS NAME RAY RAPCHAK HOLDINGS, INC.  
ENTITY CREATION DATE 03/17/2006  
JURISDICTION OF FORMATION Indiana  
PRINCIPAL OFFICE ADDRESS 11650 Olio Rd, STE 1000-353, Fishers, IN, 46037, USA

**YEARS FILED**

YEARS 2020/2021

**EFFECTIVE DATE**

EFFECTIVE DATE 09/28/2020  
EFFECTIVE TIME 1:04 PM

**REGISTERED OFFICE AND ADDRESS**

REGISTERED AGENT TYPE Individual  
NAME RAYMOND RAPCHAK  
ADDRESS 11650 Olio Rd, 353, Fishers, IN, 46037, USA

**PRINCIPAL(S)**

TITLE President  
NAME Ray Rapchak  
ADDRESS 11650 Olio Rd, 353, Fishers, IN, 46037, USA



APPROVED AND FILED  
CONNIE LAWSON  
INDIANA SECRETARY OF STATE  
09/28/2020 01:04 PM

SIGNATURE

IN WITNESS WHEREOF, THE UNDERSIGNED HEREBY VERIFIES, SUBJECT TO THE PENALTIES OF PERJURY, THAT THE  
STATEMENTS CONTAINED HEREIN ARE TRUE, THIS DAY September 28, 2020.

SIGNATURE

Ben Pecar

TITLE

Legal Representative

Business ID : 2006032700765  
Filing No. : 8734719