# N13000003608

(Re	questor's Name)				
(Ad	dress)				
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(Cit	y/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Bu	siness Entity Nar	me)			
(Document Number)					
Certified Copies	_ Certificates	s of Status			
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#### **COVER LETTER**

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

SUBJECT: RPICA CORP

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for :

\$70.00 Filing Fee \$78.75 Filing Fee & Certificate of **□\$78.75** Filing Fee \$87.50 Filing Fee, Certified Copy

& Certified Copy

& Certificate

And the state of t

ADDITIONAL COPY REQUIRED

FROM: PAUL LABINER

Status

5499 NO FEDERAL HWY

Address

**BOCA RATON, FLORIDA 33487** 

City, State & Zip

561-998-2362

Daytime Telephone number

TXADV@AOL.COM

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

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



# RECEIVED 13 APR 12 PM 2:08

### FLORIDA DEPARTMENT OF STATE DIVISION OF COMPONATIONS Division of Corporations

March 25, 2013

PAUL LABINER 5499 N FEDERAL HWY BOCA RATON, FL 33487

SUBJECT: RPICA CORP. Ref. Number: W13000017036

We have received your document for RPICA CORP. 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 purpose contained in your articles of incorporation should be more specific. Please correct your articles to reflect the specific purpose for which the non profit corporation is being organized.

it VEnclosed.

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

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 (850) 245-6052.

Jessica A Fason Regulatory Specialist II

Letter Number: 513A00006922

## ARTICLÉS OF INCORPORATION In compliance with Chapter 617, F.S., (Not for Profit)

	PRINCIPAL OFFICE				
2015					
	Principal <u>street</u> address: Ocean Drive	Mailing address, if different is:			
Unit	11				
Boyı	nton Beach, Florida 3342	6			
ARTICLE III	<i>PURPOSE</i> Th	is non for profit corporation	n intends to		
		who need medical care and			
ADMICI P III	MANAGE OF ELECTION TO				
<i>ARTICLE IV</i> Annual Mee		anner in which the directors are elected and app	pointed:		
	<del></del>	· ·			
ARTICLE V	INITIAL OFFICERS AND/OR DI	<u>RECTORS</u>	13 JAL		
		Name and Title:	13 APR SEGRE		
Name and Title:_	Natalie Perez Mendez, Pres 3015 Ocean Drive	Name and Title:	13 APR 12 SEGREDAY JABLAHASSI		
Name and Title:_	Natalie Perez Mendez, Pres		13 APR 12 AM		
Name and Title:	Natalie Perez Mendez, Pres 3015 Ocean Drive	Name and Title:Address:	57 <b>5</b> 5		
Name and Title:_Address	Natalie Perez Mendez, Pres 3015 Ocean Drive Unit 11 Boynton Beach, Florida	Name and Title:Address:	6: 50		
Name and Title: Address	Natalie Perez Mendez, Pres 3015 Ocean Drive Unit 11 Boynton Beach, Florida	Name and Title:	ETNIE LOREIA		
Name and Title: Address	Natalie Perez Mendez, Pres 3015 Ocean Drive Unit 11 Boynton Beach, Florida	Name and Title:	ETNIE LOREIA		
Name and Title: Address	Natalie Perez Mendez, Pres 3015 Ocean Drive Unit 11 Boynton Beach, Florida	Name and Title:	ETNIE LOREIA		
Name and Title:_Address	Natalie Perez Mendez, Pres 3015 Ocean Drive Unit 11 Boynton Beach, Florida	Name and Title:	0: 50		

Name and Title:	N	lame and Title:		
Address	A	ddress:	·	
Name and Title:_	N	fame and Title:		
Address	A	.ddress:		
<del></del>				
· ARTICLE VI	REGISTERED AGENT			
The name and Flo	rida street address (P.O. Box NOT acceptal			
Name:	NATALIE PEREZ MEND	EZ		
Address:	2015 OCEAN DRIVE, #1	11		
	BOYNTON BEACH, FL 33	426		
	INCORPORATOR	·		
The pame and add	Iress of the Incorporator is:  NATALIE PEREZ MEND	\ <b>:</b> 7		
Name:				
Address:	2015 OCEAN DRIVE, #	<u>11</u>		
	BOYNTON BEACH, FL 33	426		
	ed as registered agent to accept service of p miliar with and accept the appointment as re			ignated in this
Lla		eud	3/14/2013	
<del></del>	Required Signature of Registered Ag	en J	Dete	<del>_</del>
I submit this documents to the Departments	nent and affirm that the facts stated herein of State constitutes afthird degree felony as j	are true. I am aware that any false in popylded for in s.817.135, F.S.	formation submitted	in a document
$\wedge$	tale beron H	and	3/14/2013	
	Required Signature of Incorput	ator	Date	<del></del>

13 APR IZ AM IO: 50
SEGNETANY OF STATE
TALLAHAS SEE FLORDA