

P00000035831

TRANSMITTAL LETTER

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

900003166919--6  
-03/13/00--01091--007  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT:

ROBINSON & DAVIS, INC

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

PAID

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 Status

☐ \$78.75  
Filing Fee  
& Certified Copy

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

ADDITIONAL COPY REQUIRED

FILED  
00 APR -7 PM 3:29  
TALLAHASSEE FLORIDA  
SECRETARY OF STATE

FROM:

CATHY SMITH

Name (Printed or typed)

5609 US 19 SWTEL

Address

NEW PORT RICHEY, FL 34652

City, State & Zip

727-815-3682

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

March 17, 2000

EILEEN LAFFERTY  
5609 US 19 N. #L  
NEW PORT RICHEY, FL 34652

We have received your document for ROBINSON & DAVIS, 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):

Per our conversation today I am enclosing the forms and instructions to file a profit corporation. Please complete the forms and return to my attention at the address on the bottom of the cover letter.

Please return the 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) 487-6929.

Shannon Thompson  
Document Specialist

Letter Number: 600A00014879

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**

The name of the corporation shall be:

ROBINSON & DAVIS, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

5609 US HIGHWAY 19 N NEW PORT RICHEY, FL  
34652

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

COMMERCIAL RECEIVABLE MANAGEMENT

**ARTICLE IV SHARES**

The number of shares of stock is:

100,000

**ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

The name(s) and address(es):

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address registered agent is:

CATHY SMITH  
5609 US HIGHWAY 19 N  
NEW PORT RICHEY, FL 34652

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

CATHY SMITH  
5609 US HIGHWAY 19 N  
NEW PORT RICHEY, FL 34652

\*\*\*\*\*  
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

Cathy Smith  
Signature/Registered Agent

4-6-00  
Date

Cathy Smith  
Signature/Incorporator

4-6-00  
Date