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SECHETAIN STATE TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

500005222625<u>-</u>0 -04/09/02-00052-002 ******70.00 ******70.00

SUBJECT:	RI	CHTAN	FINANCIAL	SERVICES	INC.	
		(Proposed corporate name - must include suffix)				
Enclosed is an	origina	d and one(1)	copy of the articles	of incorporation and	a check for:	
☐ \$70.00 Filing Fee		\$78.75		□\$78.75	\$87.50	
		Filing Fee		Filing Fee	Filing Fee,	
_	•	& Certifica	te of Status	& Certified Copy	Certified Copy	
					& Certificate of	
					Status	
				ADDITIONAL COPY REQUIRED		
			-			
FROM: BEN MARICH Name (Printed or typed)						
	_	Name (Printed or typed)				
5647 SUMMERSIDE LANE Address						
SARASOTA FLORIDA 34231 City, State & Zip						
941 – 927 – 6233 Daytime Telephone number						
Daytime Telephone number						

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

19-16

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Flor	ida FILED
Business Corporation Act, hereby adopts the following Articles of Incorporation.	02 APR - 9 AM 11:52
ARTICLE I NAME	711111
The name of the corporation shall be:	SECNE MAN OF STATE
*	TALLAHASSEE, FLORIDA
RICHTAN FINANCIAL SERVICES	70C.
ARTICLE II PRINCIPAL OFFICE	
The principal place of business and mailing address of this corporation shall be:	
5647 SUMMERSIDE LANE.	
SARASOTA, FLORIDA 34231	
ARTICLE III SHARES	
The number of shares of stock that this corporation is authorized to have outstan	ding at any one time is:
100,000	
ARTICLE IV INITIAL REGISTERED AGENT AND STREET	ADDRESS
The name and Florida street address of the initial registered agent are:	
BEN MARICH	
5647 SUMMERSIDE LANE.	
SARASOTA, FLORIDA 34231	
ARTICLE V INCORPORATOR	
The <u>name and address</u> of the incorporator to these Articles of Incorporation are	5.
BEN MARICH.	
5697 SUMMERSIDE LANE.	
SARASOTA, FLORIDA 34231	
Dan Marish	4/05/02
Signature/Incorporator	Date
(An additional article must be added if an effective date is	s requested.)
Having been named as registered agent and to accept service of process for the above stated of certificate, I hereby accept the appointment as registered agent and agree to act in this capa provisions of all statutes relating to the proper and complete performance of my duties, a obligations of my position as registered agent	acity. I further agree to comply with the and I am familiar with and accept the
	04/05/02
Signature/Registered Agent	² Date