

P0200058916

Requester's Name
Address
SIGAL BISMOOT
City/State **16300 NE 19TH AVE SUITE B**
N MIAMI BEACH FL. 33162

600005621246-1
-05/28/02-01042-009
*****87.75 *****87.50

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

- 1. _____ (Corporation Name) _____ (Document #)
- 2. _____ (Corporation Name) _____ (Document #)
- 3. _____ (Corporation Name) _____ (Document #)
- 4. _____ (Corporation Name) _____ (Document #)

FILED
02 MAY 28 AM 9:59
SECRETARY OF STATE
TALLAHASSEE FLORIDA

- ☐ Walk in ☐ Pick up time _____
- ☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certified Copy
- ☐ Certificate of Status

NEW FILINGS

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

AMENDMENTS

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☒ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

Examiner's Initials

ARTICLE I

THE NAME OF THE CORPORATION IS:

R.P.R GROUP INC.

ARTICLE II

THE STREET ADDRESS OF THE CORPORATION IS:

16300 NE 19TH AVE SUITE B N MIAMI BEACH FL. 33162

THE MAILING ADDRESS OF THE CORPORATION IS:

16300 NE 19TH AVE SUITE B N MIAMI BEACH FL. 33162

ARTICLE III

**THE NUMBER OF SHARES OF STOCK THAT THIS CORPORATION IS
AUTHORIZED TO HAVE OUT STANDING AT ANY ONE TIME IS : 100**

ARTICLE VI

**THE NAME AND FLORIDA STREET ADDRESS OF THE INCORPORATOR
IS: SIGAL BISMOOT**

16300 NE 19TH AVE SUITE B N MIAMI BEACH FL. 33162

ARTICLE V

**THE NAME AND FLORIDA STREET ADDRESS OF THE REGISTERED
AGENT IS: SIGAL BISMOOT**

16300 NE 19TH AVE SUITE B N MIAMI BEACH FL. 33162

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICES OF PROCESS
FOR THE ABOVE STATED LIMITED LIABILITY COMPANY AT THE PLACE DESIGNATED IN
THIS CERTIFICATE. I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND
AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THIS PROVISIONS
OF ALL STATUES RELATING 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 SIGNATURE: SIGAL BISMOOT



SIGNATURE OF INCORPORATOR: SIGAL BISMOOT



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