TRANSMITTAL LETTER FILED

02 JUN -3 PM 12: 35

SECNETAL STATE TALLAHASSEE, FLORIDA

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

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00

\$78.75

Filing Fee

Filing Fee

& Certificate of Status

X1 \$78.75

\$87.50

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM:	Lainie) Aurora I	
rkom:	Luch	<u>COMPAC</u>	
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Name (Printed or typed)

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4237 Ben Blvo

torida

City, State & Zip

(850) 219-9599

Daytime Telephone number

62 21 Md NOTE: Please provide the original and one copy of the articles.

BECEINED

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In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	FILED
ARTICLE I NAME	02 JUN -3 PM 12: 35
The name of the corporation shall be:	
RCL Consulting and Development, Inc.	SECALIA SI STATE TALLAHASSEE, FLORIDA
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	
4237 Ben Blvd	
Tallahassee, Florida 39303 ARTICLE III PURPOSE The purpose for which the corporation is organized is:	.
Any and all lawful business	
ARTICLE IV SHARES The number of shares of stock is: [
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s):	
Lainie Lowery, President	
4237 Ben Blvd	
Tallahassee, Florida 32303	
ARTICLE VI REGISTERED AGENT	
The name and Florida street address of the registered agent is:	
lainie Lowery	
4237 Ben Blvd	. <u> </u>
Tallahassee, FI 32303 ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
Lainie Lowery	
4237 Ben Blvd	
Tallahassee Fl 32303	*********
Having been named as registered agent to accept service of process for the above state certificate, I am familiar with and accept the appointment as registered agent and agree	d corporation at the place designated in this
Lanio Lowerd	4/3/02
Signature/Registered Agent	Date
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Signature/Incorporator \(\square{1} \)	Date