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(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
GAVE AUTHORIZATION BY PHONE TO CORRECT A LUCLEA DATE 12-10 DOC. EXAM BC				

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TRANSMITTAL LETTER

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2002 DEC -9 AM 11: 20

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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

SUBJECT: R.	L. N. Enterprises Inc.			
-	(PROPOSED CORPORA	TENAME - MUST INCL	UDE SUNFIX)	
Enclosed are an orig	ginal and one (1) copy of the art	ticles of incorporation and	d a check for:	
□ \$70.00	\$78.75	□ \$78.75	☑ \$87.50	
Filing Fee		1		
rung ree	Filing Fee & Certificate of Status	Filing Fee	Filing Fee,	
	& Cernineate of Status	& Certified Copy	Certified Copy	
			& Certificate of	
			Status	
		ADDITIONAL CO	PY REQUIRED	
FROM:	Robert L. Nelson			
77.	Name	(Printed or typed)		
	0.470 Danisa Dilina	_		
	3470 Bowman Drive			
	Address			
	Winter Park, Florida 32792			
•	City	, State & Zip		
	407-671-7649			
	Daytime Telephone number			

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

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