

P03000104385

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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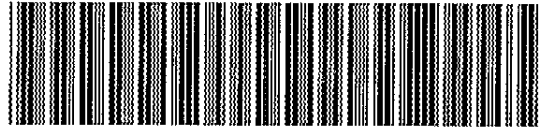
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## TRANSMITTAL LETTER

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

SUBJECT: RENAUD, INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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**

FROM: Angelina M Renaud  
Name (Printed or typed)

7615 Lindenhurst Dr  
Address

Orlando FL 32836  
City, State & Zip

407-248-9116  
Daytime Telephone number

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

## 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:

RENAUD, INC.

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

7615 Lindenhurst Dr  
Orlando FL 32836

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Planning and organizing of fitness and exercise programs.

### ARTICLE IV SHARES

The number of shares of stock is:

5,000 Shares of \$1.00 Par Value Common Stock.

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

The name(s), address(es) and title(s):

Angelia M Renaud, President  
7615 Lindenhurst Dr  
Orlando FL 32836

Todd D Renaud, Vice-President  
7615 Lindenhurst Dr  
Orlando FL 32836

### ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Angelia M Renaud  
7615 Lindenhurst Dr  
Orlando FL 32836

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Angelia M Renaud  
7615 Lindenhurst Dr  
Orlando FL 32836

\*\*\*\*\*  
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

✓ Angelia M Renaud  
Signature/Registered Agent

9-18-03  
Date

✓ Angelia M. Renaud  
Signature/Incorporator

9-18-03  
Date