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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

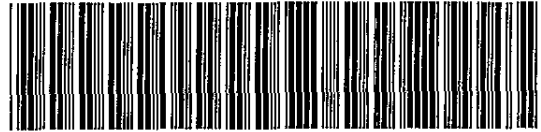
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12/21

ORIGINAL

TRANSMITTAL LETTER

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

SUBJECT: R-CAP CORPORATION

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: MICHAEL T. REILLY

Name (Printed or typed)

1417 SADLER ROAD, NO. 270

Address

FERNANDINA BEACH, FL 32034-4466

City, State & Zip

904-583-2849

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:

R-CAP CORPORATION

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1417 SADLER ROAD, NO. 270
FERNANDINA BEACH, FL 32034-4466

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY LAWFUL CORPORATE PURPOSE.

ARTICLE IV SHARES

The number of shares of stock is:

100 NO PAR VALUE COMMON SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

MICHAEL T. REILLY
1417 SADLER ROAD, NO. 270
FERNANDINA BEACH, FL 32034-4466

PRESIDENT

ARTICLE VI REGISTERED AGENT

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

MICHAEL T. REILLY
~~1417 SADLER ROAD, NO. 270~~ 487 C SO. FLETCHER AVE
FERNANDINA BEACH, FL 32034-4466

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MICHAEL T. REILLY
1417 SADLER ROAD, NO. 270
FERNANDINA BEACH, FL 32034-4466

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

Michael T. Reilly
Signature/Registered Agent MICHAEL T. REILLY

11/12/2003
Date

Michael T. Reilly
Signature/Incorporator MICHAEL T. REILLY

11/12/2003
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA