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| (Requestor's Name) | | | | |
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| (Address) | | | | |
| | | | | |
| (City/State/Zip/Phone #) | | | | |
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| PICK-UP WAIT MAIL | | | | |
| | | | | |
| (Business Entity Name) | | | | |
| | | | | |
| (Document Number) | | | | |
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| Certified Copies Certificates of Status | | | | |
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| Special Instructions to Filing Officer: | | | | |
| Special manuclicity to 1 ming Gincer. | | | | |
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Office Use Only



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FILED 04 FEB 16 PH 2: 22 SECONIASSEE, FLORIDA

TRANSMITTAL LETTER

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

| SUBJECT: | RICK-TIME CO | ORP. | _ |
|-------------------------|-----------------------------------|--|--|
| | (PROPOSED CORPORA | TE NAME – <u>MUST INCL</u> I | JDE SUFFIX) |
| Enclosed are an orig | inal and one (1) copy of the arti | cles of incorporation and | a check for: |
| ☐ \$70.00 Filing Fee | • | \$78.75 Filing Fee & Certified Copy ADDITIONAL CO | \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED |
| FROM: | 305 NE | Address | |
| | POS 759. | State & Zip - 9378 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) | ru ED |
| ARTICLE I NAME | FILED |
| The name of the corporation shall be: | 04 FEB 16 PH 2: 22 |
| Rick-TimE, CORP | |
| 1401- | SECKLIART OF STATE TALLAHASSEE, FLORIDA |
| ARTICLE II PRINCIPAL OFFICE | TALLAHASSEC, TEOMOR |
| The principal place of business/mailing address is: | |
| 305 NE 61 ST | |
| MIAM! FC. 33137 | |
| ARTICLE III PURPOSE | ~ |
| The purpose for which the corporation is organized is: | |
| ARY AND DLL LAWFULL BUSINESS | |
| | |
| ARTICLE IV SHARES | |
| The number of shares of stock is: | |
| 160 | |
| ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS | ÷ |
| List name(s), address(es) and specific title(s): | |
| LEOPOLDO PACI - President | |
| 305 NE 615 | |
| Miemi Fl. 33137 | |
| F(, 3012) | |
| ARTICLE VI REGISTERED AGENT | |
| The <u>name and Florida street address</u> of the registered agent is: | |
| LEOPOLDO PACI | |
| 305 NE 61 55 | |
| Mi ami Fc. 3313) | |
| ARTICLE VII INCORPORATOR | |
| The <u>name and address</u> of the Incorporator is: | |
| LEDPOLDO PARÍ 305 NE 61 JT Midmi Fl. 33/17 | |
| \$03 / (C D D D) | |
| ************************************** | *********** |
| Having been named as registered agent to accept service of process for the above stated cor- certificate, I am familiar with and accept the appointment as registered agent and agree to act | poration at the place designated in this in this |
| 0 / 1 | , |
| Signature/Registered Agent | 1/10/2004 |
| Signature/Registered Agent | Date |
| | 1/10/2004 Date 1/10 /2004 |
| Par flopelle | 10 12004 |
| Signature/Incorporator | Date |