

PO4000068382

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TALLAHASSEE, FLORIDA  
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4/21

## TRANSMITTAL LETTER

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

SUBJECT: Triple R Home Inspection Inc.  
(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: Rosita Allende  
Name (Printed or typed)

160 NW 176 ST, 302-2  
Address

MIAMI FL 33169  
City, State & Zip

305-652-9811  
Daytime Telephone number

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

Rosita GAVE  
AUTHORIZATION BY PHONE TO  
CORRECT Shares  
DATE 4/26/04  
OFF. EXAM

**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: **TRIPLE R Home Inspection Inc.**

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

**160 N.W. 176 ST. Suite 302-2  
MIAMI FL 33169**

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

**Home Inspections**

**ARTICLE IV SHARES**

The number of shares of stock is: **100**

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

**ROSITA Allende (PRES)  
ROBERT N. JOUGHIN (V-PRES)**

**ARTICLE VI REGISTERED AGENT**

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

**ROSITA ALLENDE  
160 N.W. 176 ST. Suite 302-2  
MIAMI FL 33169**

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

**ROSITA ALLENDE  
160 N.W. 176 ST. Suite 302-2  
MIAMI FL 33169**

\*\*\*\*\*

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

*Rosita Allende*

Signature/Registered Agent

**4/16/04**

Date

*Rosita Allende*

Signature/Incorporator

**4/16/04**

Date

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