

PO400016569

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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04 DEC -8 PM 3:49
CLERK OF STATE
TALLAHASSEE, FLORIDA

14
12/9/04

TRANSMITTAL LETTER

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

SUBJECT: Retirement Strategies Specialists, 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
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: Jack D. Kleas
Name (Printed or typed)

1225 W. Beaver St, Suite 112
Address

Jacksonville, FL 32204
City, State & Zip

(904) 265-4739
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)

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ARTICLE I NAME

The name of the corporation shall be:

Retirement Strategies Specialists, Inc. SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1225 West Beaver St
Jacksonville, FL 32204

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Financial Advisors

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Jack D. Kleas, President
3540 Lawrence Rd
Orange Park, FL 32065

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Jack D. Kleas
3540 Lawrence Rd
Orange Park, FL 32065

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Jack D. Kleas
3540 Lawrence Rd
Orange Park, FL 32065

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



Signature/Registered Agent

12/5/04

Date



Signature/Incorporator

12/5/04

Date