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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

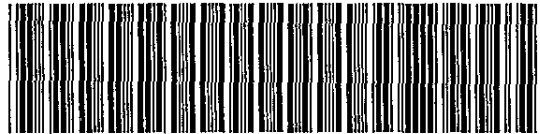
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05 JUL 20 AM 10:00
SECRETARY OF STATE

J. Shivers JUL 21 2005

W05-33448

TRANSMITTAL LETTER

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

SUBJECT: R Carney 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: Robbie D. Carney
Name (Printed or typed)

2110 Pondella Rd.
Address

Cape Coral FL 33909
City, State & Zip

239-218-5144
Daytime Telephone number

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RECEIVED
DIVISION OF STATE
CORPORATIONS

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: *RCarney Inc.*

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: *2110 Pondella Rd
Cape Coral FL 33909*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: *Real Estate Consultant*

ARTICLE IV SHARES

The number of shares of stock is: *100* ~~700%~~ *100 Shares*

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): *Robbie D. Carney
Same AS Above*

ARTICLE VI REGISTERED AGENT

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

*Robbie D. Carney
Same AS Above
2110 Pondella Rd
Cape Coral FL 33909*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*Robbie D. Carney
Same AS Above
2110 Pondella Rd
Cape Coral FL 33909*

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

Robbie D. Carney

Signature/Registered Agent

2/7/05

Date

Robbie D. Carney

Signature/Incorporator

2/7/05

Date

05 JUL 20 AM 10:36

FILED
STATE OF FLORIDA
CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF CAPE CORAL