

PD5000114940

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

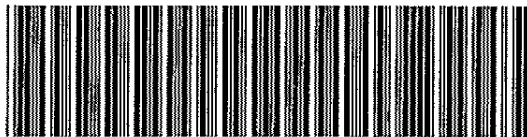
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

8/18/05  
BWK

## TRANSMITTAL LETTER

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

**SUBJECT:** Rainbow Irrigation II, 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:** KAREN ERP  
Name (Printed or typed)

8040 NW 41st COURT  
Address

SUNRISE, FL 33351  
City, State & Zip

954-290-3988  
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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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

Rainbow Irrigation II, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

7300 SW 100 Street, Ocala, FL 34476

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Sprinkler company and any other lawful business

**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):

Karen Erp, President/Sec  
8040 NW 41 Court  
Sunrise, FL 33351

**ARTICLE VI REGISTERED AGENT**

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

Karen Erp  
8040 NW 41 Court  
Sunrise, FL 33351

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

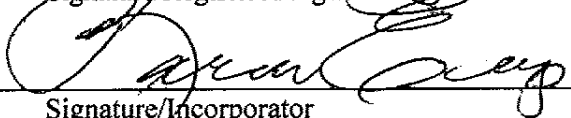
Karen Erp  
8040 NW 41 Court  
Sunrise, FL 33351

\*\*\*\*\*

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

8-16-05  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

8-16-05  
\_\_\_\_\_  
Date