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(Requestor's Name)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
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Certified Copies Certificates of Status				
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SECRETARY OF STATE

r.f. Jle

COVER LETTER

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

SUBJECT:	ental Man In	C. TE NAME – <u>MUST INCL</u>	LOSE STURBLES
·	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	ODE SUFFIX)
Enclosed are an ori	ginal and one (1) copy of the arti	cles of incorporation and	a check for:
S70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM: _	Larry St. Amand	(Printed or typed)	
	820 SE 9th St	Address	
	Cape Coral, Fl	33990 State & Zip	,
	339-707-8057 Daytime 1	Telephone number	

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

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
ARTICLE I NAME	FILED
ARTICLE I NAME The name of the corporation shall be:	06 FEB -1 PH 3: 52
η 1 λ	SECRETARY OF
Rental Man, Inc.	SECRETARY OF STATE TALLAHASSEE, FLORIDA
ARTICLE II PRINCIPAL OFFICE	-, CONIDA
The principal place of business/mailing address is:	
830 SE 9th Street	
Cape Coral, FL 33990	
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	
Real Estate Rental	
real Estate remai	-
ARTICLE IV SHARES	
The number of shares of stock is: (00	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	S .
List name(s), address(es) and specific title(s):	
Larry St. Amand President	
830 SE 9th Street	
Cape Coral, FL 33990	<u>.</u>
ARTICLE VI REGISTERED AGENT	
	egistered agent is:
Larry St. Amand	
830 3E9th Street	
Cape Coral, FL 33990	
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:	
Larry St. Amand 830 SE 945 Street	
830 BE 945 Street	
Cape Coral, FL 33990	

certificate, I am familiar with and accept the appointment as registered agent and ag	
	12-1
Signature/Registered Agent	/
	====

129/06 Date

ARTICLES OF INCORPORATION

Signature/Incorporator