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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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CA:5-31

## **COVER LETTER**

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

SUBJECT:	MPierre L	LC		
	(PROPOSED CORPORA)	TE NAME – <u>MUST INCLU</u>	DE SUFFIX)	
Enclosed are an orig	ginal and one (1) copy of the artic	cles of incorporation and	a check for:	
\$70.00	\$78.75	\$78.75	\$87.50	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
	& Certificate of Status	& Certified Copy	Certified Copy & Certificate of	
			Status	
		ADDITIONAL CO	PY REQUIRED	
		*		
FROM:	Ullen to	(Printed or typed)	•	
Name (Finited of typed)				
507 n. Dixie +lwy				
Address				
	10kg 120-	AL C 2	2460	
	City,	State & Zip		
	Eur	1102 925	7	
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)  ARTICLE I NAME  The name of the corporation shall be: RM Pierre, Corp.  Of MAY 30 PM 3: 09  SECRETARY 05	
SECRETARY OF STATE TALLAHASSEE, FLORIDA  The principal place of business/mailing address is:  Wellington, FC 33467	
ARTICLE III PURPOSE The purpose for which the corporation is organized is: Property Management	
ARTICLE IV SHARES The number of shares of stock is: 100 SHARES	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS  List name(s), address(es) and specific title(s):  Housevelt Pierre-President (11154 Pacific St. Welling to fi 3346	
marie Pierre-Vice Prosident (11154 Pacific 8t. Wellington	76
ARTICLE VI REGISTERED AGENT  The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:	
Allen Falk ESO 507 N Dixle HWY Lake Worth FL 33460	
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:	
Allen Falk ESQ 507 N Dixie Hwy Lake Worth FL 33460	
**************************************	
Signature Registered Agent  Date  5 6 06	
Signature/Incorporator Date	