

P060880156611

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

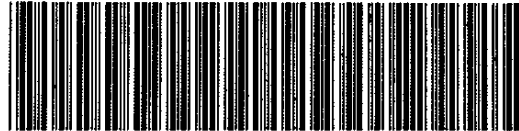
(Business Entity Name)

(Document Number)

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

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Office Use Only



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11/17/06--01008--005 \*\*70.00

2006 DEC 20 A 8:54  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

W-50725



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 20, 2006

RASCHEL NICOLE ROBINSON  
3989 LEONNIE RD., #1  
JACKSONVILLE, FL 32208

SUBJECT: RASCHEL ROBINSON SUPPORT SERVICES INC.  
Ref. Number: W06000050725

We have received your document for RASCHEL ROBINSON SUPPORT SERVICES INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6995.

Wanda Cunningham  
Document Specialist  
New Filing Section

Letter Number: 006A00067584

memo: I have changed my address.  
The new one is enclosed.

RECEIVED  
06 DEC 20 PM 12:57  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FL 32314

## COVER LETTER

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

SUBJECT: Baschel Robinson Support Services 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: Baschel Nicole Robinson  
Name (Printed or typed)

8776 5th Ave.  
Address

Jacksonville, FL 32209  
City, State & Zip

(904) 482-2903, (904) 768-1675  
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:

Raschel Robinson Support Services I

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

8774 5th Ave.  
Jacksonville, FL 32207

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To expand from independent  
to an agency.

**ARTICLE IV SHARES**

The number of shares of stock is: 1

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

Raschel Robinson (Director, President)  
8774 5th Ave.  
Jacksonville, FL 32207

**ARTICLE VI REGISTERED AGENT**

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

Raschel Robinson  
8774 5th Ave.  
Jacksonville, FL 32207

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Raschel Robinson  
8774 5th Ave.  
Jacksonville, FL 32207

\*\*\*\*\*

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

Raschel Robinson

Signature/Registered Agent

12-22-06

Date

Raschel Robinson

Signature/Incorporator

12-22-06

Date

2006 DEC 20 A 8:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED