

P07000024491

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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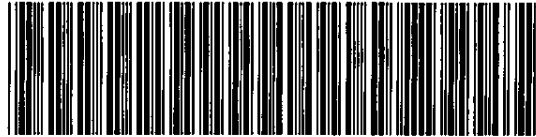
(Business Entity Name)

(Document Number)

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

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

SUBJECT: THE NFR RA DEMIN COLLECTION 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: Raynelle B. Chapman  
Name (Printed or typed)

2813 S.E. Tate AVENUE  
Address

Port St. Lucie, FL 34984  
City, State & Zip

772-361-3200  
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:

The NFR RA DEMIN COLLECTION INC.

## **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

2813 S. E. Tate Avenue  
Port St. Lucie, FL 34984

## **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Any and all lawful purposes

## **ARTICLE IV SHARES**

The number of shares of stock is:

5,000.000

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

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

Raynelle B. Chapman/2813 S.E. Tate Ave./Port St. Lucie, FL 34984--President/ C.E.O  
Dwayne Chapman/ 2813 S. E. Tate Ave. Port St. Lucie, fl 34984--Director  
Cleavon Cox/ 2813 S. E. Tate Ave./Port St. Lucie, FL 34984 --Director  
Calvin Cox 2813 S. E. Tate Ave. Port St. Lucie, FL 34984--Director

## **ARTICLE VI REGISTERED AGENT**

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

Dwayne Chapman  
2813 S. E. Tate Ave.  
Port St. Lucie, FL 34984

## **ARTICLE VII INCORPORATOR**

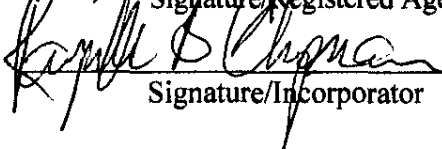
The name and address of the Incorporator is:

Raynelle B. Chapman  
2813 S. E. Tate Ave.  
Port St. Lucie, FL 34984

\*\*\*\*\*

*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

  
Signature/Incorporator

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

  
Date

  
Date