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10 JUN 10 PM 2:36  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

MRS  
6/11

## COVER LETTER

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

**SUBJECT:** RAS Reporting, 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:** Renee A. Steinbauer

Name (Printed or typed)

142 Old Nichols Circle

Address

Auburndale, FL 33823

City, State & Zip

586-524-1642

Daytime Telephone number

E-mail address: (to be used for future annual report notification)

**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:

RAS Reporting, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal street address and mailing address, if different is:

142 Old Nichols Circle  
Auburndale, FL 33823

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Court reporting.

**ARTICLE IV SHARES**

The number of shares of stock is:

1000

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

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

*no* ~~Rene~~ Steinbauer President 142 Old Nichols Circle Auburndale FL 33823  
Renee

**ARTICLE VI REGISTERED AGENT**

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

*Renee* ~~Rene~~ A. Steinbauer  
142 Old Nichols Circle  
Auburndale  
FL 33823

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

*Renee* ~~Rene~~ A. Steinbauer  
142 Old Nichols Circle  
Auburndale  
FL 33823

\*\*\*\*\*

*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*

*RAS*

Signature/Registered Agent

*RAS*

Signature/Incorporator

FILED

10 JUN 10 PM 2:36

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

*6/1/10*

Date

*6/1/10*

Date