

P10000087547

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(Business Entity Name)

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OCT 25 PM 2:48  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PS 10/26/10

## COVER LETTER

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

**SUBJECT:** RUFUS ON TIME, 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:** Robert Wayne  
Name (Printed or typed)

PO Box 9646  
Address

Naples, FL 34101-9646  
City, State & Zip

Daytime Telephone number

floridablueline@aol.com  
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

RUFUS ON TIME, INC.

The name of the corporation shall be:

## ARTICLE II PRINCIPAL OFFICE

Principal street address  
364 Logan South  
Naples, FL 34119

Mailing address, if different is:

PO Box 9646  
Naples, FL 34101-9646

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:  
Any and all lawful business in the state of Florida.

## ARTICLE IV SHARES

The number of shares of stock is: 500 (five hundred)

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Robert Wayne, President  
Address: PO Box 9646  
Naples, FL 34101-9646

Name and Title: None  
Address:

Name and Title: Simone Wayne, Vice President  
Address: PO Box 9646  
Naples, FL 34101-9646

Name and Title: None  
Address:

Name and Title: None  
Address:

Name and Title: None  
Address:

## ARTICLE VI REGISTERED AGENT

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

Name: Robert Wayne  
Address: 9420 Bonita Beach Road, #200  
Bonita Springs, FL 34135

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Robert Wayne  
Address: PO Box 9646  
Naples, FL 34101-9646

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

Required Signature/Registered Agent

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Required Signature/Incorporator

Date

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