P10000099809

(Requestor's Name)				
(Address)				
(Address)				
(Ci	ty/State/Zip/Phone	⇒ #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special instructions to Filing Officer:				
946				

Office Use Only



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SECRETARY OF STATE FALLAHASSEE FLORIDA 10 DEC -- 0 AM O. O.

COVER LETTER

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

SUBJECT: RLAPP, INC.			
(PROPOSED CORPORA	TE NAME – <u>MUST INCLUDE SUFFIX</u>)		
Enclosed are an original and one (1) copy of the artic	cles of incorporation and a check for:		
\$70.00 Filing Fee & Certificate of Status	\$78.75 \$87.50 Filing Fee & Certified Copy & Certificate of Status		
	ADDITIONAL COPY REQUIRED		
FROM: RONALD LEVONDOSKY	(Printed or typed)		
15106 NIGHTHAWK DR			
A	ddress		
TAMPA, FL 33625	State & Zip		
813-870-0060 Daytime Te	elephone number		
ronlev27@verizon.net E-mail address: (to be used for future annual report notification)			

NOTE: Please provide the original and one copy of the articles.

ARU Business Services, PA 6702 N. Gunlock Avenue Tampa, FL 33614

Tel: 813-870-0060 Fax: 813-870-1052

Email: arul@verizon.net

December 6, 2010

Florida Department of State Division of Corporations Attn: Ruby Dunlap P.O. Box 6327 Tallahassee, FL 32314

RE: RLAPP, Inc.

Document #W1000053799

Dear Ms. Dunlap:

As requested, we have enclosed a check for \$70 to cover the cost of setting up the new Articles of Incorporation for RLAPP, Inc. We will send a request for the refund of our on-line payment under separate cover.

If you require any additional information in order to process this request, please contact my office directly at 813-870-0060.

Sincerely,

Ron Porat, CPA

President, ARU Business Services, P.A.

RP/ds

10 DEC -9 AMII: 5

RLAPP, INC.

Ronald Levondosky, President 7808 Land O Lakes Blvd Land O Lakes, FL 34638

October 5, 2010

Division of Corporations Amendment Section P.O. Box 6327 Tallahassee, FL 32314

RE: Document #: P08000109288 RLAPP, Inc.

To Whom It May Concern:

Please let this letter serve as proof that we have no intention of revoking the dissolution of the corporation, RLAPP, Inc., therefore releasing the name for use to another entity.

If you require any further information in order to process this request, please contact my CPA, Ron Porat, at 6702 N Gunlock Ave, Tampa, FL 33614. He can be reached via phone at 813-870-0060.

Sincerely,

Ronald Levondosky,

President

SECRETARY OF STATE

AM 8: 05

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I No.	RLAPP, INC.		
ARTICLE II PI	RINCIPAL OFFICE		
	Principal street address		Mailing address, if different is:
<u>780</u>	8 Land O Lakes Blvd		
Lan	d O Lakes, FL 34638		
ARTICLE III PU	IRPOSE		
	h the corporation is organized is:		Fu 7 market
Any and all lawf			FE S
·			AHASS
			To # 11
ARTICLE IV SI	HADES		17 S 9 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
The number of shares			ST is
			# F
ARTICLE V IN	NITIAL OFFICERS AND/OR DIRECTOR	<u>85</u>	₽'
Name and Title:	Ronald Levondosky, President	Name and Ti	itle:
	15106 Nighthawk Dr		
	Tampa, FL 33625	-	
		-	
Name and Title:		_ Name and T	itle:
Address:		_ Address:	
		_	
		_	
Name and Title		Name and T	itle.
Address:		Name and 1.	
radiess.			
		_	
	EGISTERED AGENT	C.1	
Name:	a street address (P.O. Box NOT acceptable) o Ronald Levondosky		igent is:
Address:	15106 Nighthawk Dr		
Addiess.	Tampa FL 33625	_	
	Tanpa, It ooos	_	
	ICORPORATOR		
	ss of the Incorporator is:		
Name:	Ron Porat	_	
Address:	6702 N Gunlock Ave	_	
	Tampa, FL 33614	_	
	as registered agent to accept service of proces amiliar with and accept the appointment as reg		stated corporation at the place designated in nd agree to act in this capacity
1) nox			u.l1
Londa V	Required Signature/Registered Agent		11/30/10
	Required Signature/Registered Agent		· · · Date
I submit this docume	nt and affirm that the facts stated herein are	true. I am aw	are that the false information submitted in a
	ertment of State constitutes a third degree felon		
,) , , ,			1 /
1		•	1(13-10
	Required Signature/Incorporator	· · · · · · · · · · · · · · · · · · ·	Date