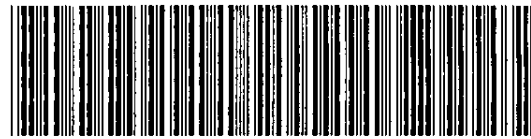


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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only

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MAR 22 PM 4:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

513824
3/24/11



RECEIVED

11 MAR 22 PM 2:20

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS
Division of Corporations

March 10, 2011

ROBERT CLARKE
4260 NW 24 ST
LAUDERHILL, FL 33313

SUBJECT: ROBERT CLARKE, INC.
Ref. Number: W11000013824

We have received your document for ROBERT CLARKE, INC. and your check(s) totaling \$87.50. 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. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return 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) 245-6901.

Pamela Smith
Regulatory Specialist II

Letter Number: 911A00005957

COVER LETTER

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

SUBJECT: ROBERT CLARKE, 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 CLARKE
Name (Printed or typed)

4260 NW 24 St.
Address

Landerhill Fl. 33313
City, State & Zip

954 226 1225
Daytime Telephone number

Bob Clarke 44 @ YAHOO.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

The name of the corporation shall be:

ROBERT CLARKE, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

4260 NW 24 ST.
LAUDERHILL
FL 33313

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

INSPECTION SERVICES

ARTICLE IV SHARES

The number of shares of stock is:

1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Robert R. CLARKE
Address: 4260 NW 24 ST.
LAUDERHILL
FL 33313

Name and Title: President
Address:

Name and Title: Robert R. CLARKE Secretary/Treasurer
Address: 4260 NW 24 ST.
LAUDERHILL
FL 33313

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

ARTICLE VI REGISTERED AGENT

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

Name: CATHERINE DECKER
Address: 8198 Royal Palm Court
Tamarac FL 33321

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Robert R. Clarke
Address: 4260 NW 24 ST.
Lauderhill, FL 33313

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

Catherine Decker

Required Signature/Registered Agent

3/1/2011

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.

[Signature]

Required Signature/Incorporator

3/1/11

Date