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2011 MAY 31 PM 4:51  
SECRETARY OF STATE  
PALM BEACH, FLORIDA

T. Burch JUN 1 2011

## COVER LETTER

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

SUBJECT: **RASA KLARA, 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: **RASA KLARA**

Name (Printed or typed)

**3714 FLAGLER AVE**

Address

**KEY WEST, FL 33040**

City, State & Zip

**305-304-7024**

Daytime Telephone number

**RAIRASA@YAHOO.COM.co.uk**

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** RASA KLARA, INC  
The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
3714 FLAGLER AVE  
KEY WEST, FL 33040

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
ANY LAWFUL BUSINESS ACTIVITY

**ARTICLE IV SHARES**

The number of shares of stock is: 500

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

Name and Title: RASA KLARA-PRES  
Address: 3714 FLAGLER AVE  
KEY WEST, FL 33040

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

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: MICHELLE C. CLAUSON, CPA, PA  
Address: 1023 CATHERINE ST  
KEY WEST, FL 33040

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: RASA KLARA  
Address: 3714 FLAGLER AVE  
KEY WEST, FL 33040

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

 CPT

Required Signature/Registered Agent

5/24/11

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.

X  RASA KLARA

Required Signature/Incorporator

5/24/11

Date

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DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA