

P/1000056791

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

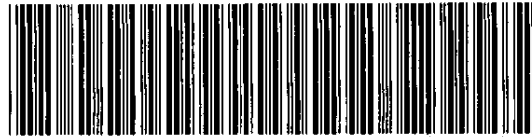
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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11 JUN 17 AM 11:08

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED

11 JUN 17 AM 8:43

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

✓ 06/20/11

LAZARUS

CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. R.C.V. INC
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☒ Walk in ☒ Pick up time 2.00 ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☒ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

Examiner's Initials

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

ARTICLE I NAME R.C.U. INC
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
590 E 47 ST
HIALEAH
FLORIDA 33013

Mailing address, if different is:
590 E 47 ST
HIALEAH
FLORIDA 33013

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
AIR CONDITIONING REPAIRS AND REFREGERATION REPAIRS

ARTICLE IV SHARES

The number of shares of stock is: 100 SHAQRES @ 1.00 PER VALUE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: PRESIDENT ORLANDO E DIAZ
Address: 590 E 47 ST
HIALEAH
FLORIDA 33013

Name and Title: SECRETARY CARIDAD J DIAZ
Address: 590 E 47 ST
HIALEAH
FLORIDA 33013

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:

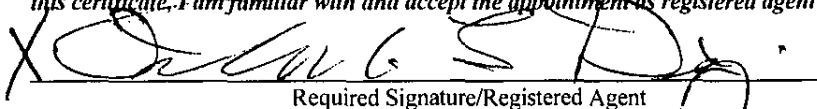
Name: ORLANDO E DIAZ
Address: 590 E 47 ST
HIALEAH FL 33013

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: ORLANDO E DIAZ
Address: 590 E 47 ST
HIALEAH FL 33013

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

06/13/2011
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.


Required Signature/Incorporator

06/13/2011
Date

SECRETARY OF STATE
JUL 17 AM 8:43
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TALLAHASSEE FLORIDA