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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				
Special Instructions to Filing Officer:				

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

COVER LETTER

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

2

SUBJECT: RSTJ Enterprises, Inc.		
(PROPOSED CORPORA)	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an original and one (1) copy of the artic	eles of incorporation and	d a check for:
\$70.00 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
	ADDITIONAL CO	OPY REQUIRED
FROM: Richard St. John	(Printed or typed)	
12680 Magnolia Ct.		
Coral Springs, FL 33071	ddress State & Zip	
954 330-1047	lephone number	
rsjlms@gmail.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

ARTICLE I The name of the co	NAME RSTJ Enterprises, In	nc.	
The name of the co	orporation shall be:		
ARTICLE II	PRINCIPAL OFFICE	N. 411	11 20 1200
	Principal street address	_	ldress, if different is:
	12680 Magnolia Ct. Coral Springs, FL 33071		
<u>.</u>	Zorar Spirings, FL 33071		
ARTICLE III	DIMPOCE		
	/hich the corporation is organized is:		
	orporate clients with effective busi	iness solutions.	
. о р. от. ао о.	5. por ato 5		
ARTICLE IV			
The number of sha	res of stock is:1000 Shares		
ARTICLE V	INITIAL OFFICERS AND/OR DIREC	TOPS	
	itle:Richard St. John		
Address:	12680 Magnolia Ct	Address:	
	Coral Springs, FL 33071		
Name and T	itle:	Name and Title:	
Address:		Address:	
Nama and T	itle:	Nome and Title:	
Address:	mie	Address:	
riddross.			
			
ADTIOLE IN	DECICTEDED ACENT		1 N SE
	REGISTERED AGENT orida street address (P.O. Box NOT acceptab	ale) of the registered agent is:	SECRETARY INSION OF CT
Name:	Richard St. John		G WETT
Address:	12680 Magnolia Ct.		72 影
	Coral Springs, FL 33071		
4 DATAT D 1111			PHI2: 5
ARTICLE VII			S SE
Name:	dress of the Incorporator is: Richard St. John		2 <u>5</u> <u>5 </u>
Address:	12680 Magnolia Ct.		9 15
riddiess.	Coral Springs, FL 33071		
			
	ed as registered agent to accept service of p		
his certificate, I ai	m familiar with and accept the appointment a	is registered agent and agree to ac	et in this capacity
4			8/10/2011
	Required Signature/Registered Agent	<u> </u>	Date
	iment and affirm that the facts stated herei		
locument to the D	epartment of State constitutes a third degree	felony as provided for in s.817.15	5, F.S.
	0.111		0/40/0044
	cicaol		8/10/2011
	Required Signature/Incorporator		Date