## 711000096502

(F	Requestor's Name)	
(A	Address)	
A)	ddress)	
(C	City/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(E	Business Entity Nar	me)
([	Occument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	o Filing Officer:	<u> </u>

Office Use Only



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DELY SAN COLLARS IVISION OF CORPORATIONS TALLAMASSES, FLORIDA

RECEIVED

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J. SHIVERS HOV 0 7 2011:

## **COVER LETTER**

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

SUBJECT: RAY'S Odd LOB SERVICE TAC.  (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)	
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:  \$78.75  Filing Fee  & Certificate of Status  \$87.50  Filing Fee  & Certified Copy  & Certificate of Status	
FROM: TSPAGL HENRY IR  Name (Printed or typed)	
Address  TALLAMAGGE, FL 32311  City, State & Zip  B50-576-7850  Daytime Telephone number	
Daytime Telephone number  E-mail address: (to be used for future annual report notification)	J

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)

<u>ARTICLE I</u>	<u>NAME</u>		
The name of the o	corporation shall be: RAY'S odd_	LB SEPVICE IN	e
ARTICLE II	PRINCIPAL OFFICE		
	Deinainal stuast address	Mailing ad	dress, if different is:
	4060 PONOLOPO Rd. (05) THURLASCE, FL 522	6106 LAGI	AWAY (AL)
	TALLALASTE, A 52	as TAUAMAS	188, XIA. 32311
ARTICLE III	PURPOSE	. ,	
ine purpose for	which the corporation is organized is: 70	OPRIATE LEA	city
RPPAIR	which the corporation is organized is: To  Home, TENT RENT,	Just Propioin	of A Service
ARTICLE IV The number of sh	SHARES hares of stock is: 100 °/		
ARTICLE V	INITIAL OFFICERS AND/OR DIRECT	TORS	
Name and 'Address:	Title: OWNER-TERARITED POR PENELOPE POR TALLA FELA 32305	Address:	
Nama and	Title:	Name and Title	
Address:	Title.		
riadiosii.			
•			
Name and	Title:	Name and Title	
Address:	ride.	Address:	
			>
ADDIOLD ID	DECKGERED ACERM		
	REGISTERED AGENT  lorida street address (P.O. Box NOT acceptab	ale) of the registered agent is:	
Name:	ISRAUL HONRY	A P	Co Br to towns
Address:	40/ DENOTION PAR	<del>= 1</del> /c	S 2 7
	TAUAGOGO FL. B	2305	
	INCORPORATOR		
Name:	ddress of the Incorporator is:	SPECIES ISPACILLO	PURY STR. 37
Address:	4000 DANPLOP Del		21-1-1-1-1-1
	TALLA MASSIO, FL 3	2306	
- × · ·			ar comment of the comment
	med as registered agent to accept service of po am familiar with and accept the appointment a		
inis cerupeuie, i	am jamutar with and accept the appointment a	is regisiereu agera una agree to ac	t in inis capacity
SIM	8 Makel		11/2/11
	Required Signature/Registered Agent	<u> </u>	Date
	required Signature/Registered Agent	·	Date
	cument and affirm that the facts stated herei		
document to the	Department of State constitutes a third degree	felony as provided for in s.817.15	5, F.S.
/ km	as Throw		11/1/11
A JUIC	ier o styla		01/1/01
_	Rectured Signature/Incorporator		Date
	•		