

P12000015729

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

(Business Entity Name)

(Document Number)

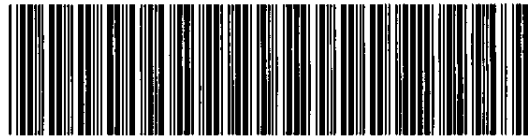
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

CORRECTED SPELLING OF  
"SERVILE" IN THE NAME OF  
CORPORATION. ALSO REMOVED  
PERCENTAGE SIGN FROM  
"SHARES" PER CONVERSATION  
WITH MR. LOPEZTEGUE'S  
TRANSLATING REPRESENTATIVE.

Office Use Only

K 02/15/12



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02/13/12--01017--013 \*\*78.75

FILED  
12 FEB 13 AM 11:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K 02/15/12

## COVER LETTER

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

SUBJECT: R & C REMODELING AND SERVICES 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: RAFAEL LOPETEGUI  
Name (Printed or typed)

431 NW 3 ST APT # 411  
Address

MIAMI, FLORIDA 33128  
City, State & Zip

(786) 487-8973  
Daytime Telephone number

RALPHALOP2002@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**

R & C REMODELING AND SERVICES INC.  
The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
431 NW 3 ST APT # 411  
MIAMI, FLORIDA 33128

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
CONTRUCTIONS.

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: <u>RAFAEL LOPETEGUI</u>	Name and Title: _____
Address: <u>431 NW 3 ST APT # 411</u>	Address: _____
<u>MIAMI, FLORIDA 33128</u>	_____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____

**ARTICLE VI REGISTERED AGENT**

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


Name: RAFAEL LOPETEGUI  
Address: 431 NW 3 ST APT # 411  
MIAMI, FLORIDA 33128

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: RAFAEL LOPETEGUI  
Address: 431 NW 3 ST APT # 411  
MIAMI, FLORIDA 33128

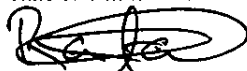
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent

02/07/12  
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

02/07/12  
Date

RECEIVED  
12 FEB 13 AM 11:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA