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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers JUN 01 2012

COVER LETTER

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

SUBJECT: Rivers Enterprise of Tallahassee 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: Frances Rivers-Cox
Name (Printed or typed)

139 Eugene Lamb Road
Address

Midway Florida 32343
City, State & Zip

(850) 694-2725
Daytime Telephone number

Rivers3girls@hotmail.com
E-mail address (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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

The name of the corporation shall be: Rivers Enterprise of Tallahassee, INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

139 Eugene Lamb road
Midway FL 32343

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

For any and all lawful purposes.

ARTICLE IV SHARES

The number of shares of stock is: 500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Frances Rivers-Cox Name and Title: _____
Address: 139 Eugene Lamb road Address: _____
Midway, FL 32343 _____
President _____

Name and Title: Dwayne Siplin Name and Title: _____
Address: 1445 Budhenny Place Address: _____
Tallahassee, FL 32317 _____
Treasurer _____

Name and Title: Rodnessa Lockwood Name and Title: _____
Address: 139 Eugene Lamb road Address: _____
Midway, FL 32343 _____
Secretary _____

ARTICLE VI REGISTERED AGENT

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

Name: Frances Rivers-Cox
Address: 139 Eugene Lamb Rd
Midway FL 32343

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Frances Rivers-Cox
Address: 139 Eugene Lamb Rd
Midway FL 32343

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

[Signature]
Required Signature/Registered Agent

06/01/2012
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.

[Signature]
Required Signature/Incorporator

06/01/2012
Date

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TALLAHASSEE, FLORIDA