

P12000065917

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

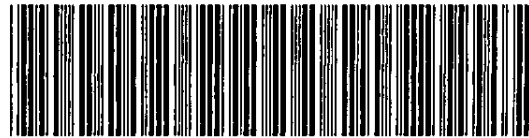
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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07/27/12--01027--010 **78.75

MRD
7/30/12

FILED
12 JUL 27 AM 11:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: **RHC 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: **RAUL H. CID**
Name (Printed or typed)

457 VISTA ISLES DRIVE, APT. 2121
Address

PLANTATION, FL 33325
City, State & Zip

954-696-3029
Daytime Telephone number

MANNS27@HOTMAIL.ES
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

The name of the corporation shall be:

RHC SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

457 VISTA ISLES DRIVE, APT. 2121
PLANTATION, FL 33325

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The corporation is formed to conduct and transact all lawful business activities allowed under the laws of the State of Florida

ARTICLE IV SHARES

The number of shares of stock is: **100**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **RAUL H. CID - PRESIDENT**

Address: 457 VISTA ISLES DRIVE, APT. 2121
PLANTATION, FL 33325

Name and Title: _____

Address: _____

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: **RAUL H. CID**

Address: 457 VISTA ISLES DRIVE, APT. 2121
PLANTATION, FL 33325

ARTICLE VII INCORPORATOR

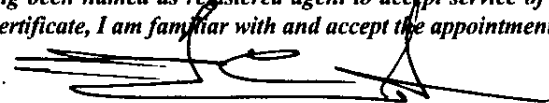
The name and address of the Incorporator is:

Name: **RAUL H. CID**

Address: 457 VISTA ISLES DRIVE, APT. 2121
PLANTATION, FL 33325

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

x



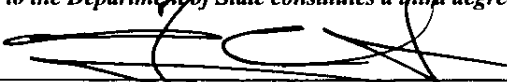
Required Signature/Registered Agent

07/16/2012

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.

x



Required Signature/Incorporator

07/16/2012

Date

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TALLAHASSEE, FLORIDA