

P12 000086739

(Requestor's Name)

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(City/State/Zip/Phone #)

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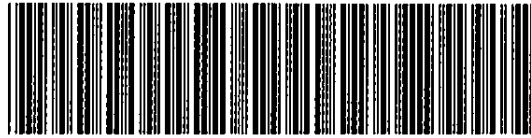
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/15/12--01006--023 **78.75

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12 OCT 15 AM 11:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

12 OCT 15 PM 12:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers OCT 15 2012

COVER LETTER

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

SUBJECT: RB consulting Firm
(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: Randolph Busch
Name (Printed or typed)

800 Ocala Rd Ste 300
Address

Tallahassee FL 32304
City, State & Zip

850-766-6356
Daytime Telephone number

randybusch@yahoo.com
E-mail address: (to be used for future annual report notification)

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12 OCT 15 PM 12:27
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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: RB Consulting Incorporated

ARTICLE II PRINCIPAL OFFICE

Principal street address
800 Ocala Rd
Ste 300-187
Tallahassee, FL 32304

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Consulting Services

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Randolph Bush CEO
Address: 800 Ocala Rd
Ste 300-187
Tallahassee, FL 32304

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: Tameka Freeman
Address: 800 Ocala Rd Ste 300-187
Tallahassee, FL 32304

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Randolph Bush, Jr
Address: 800 Ocala Rd
Ste 300-187
Tallahassee, FL 32304

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

Tameka Freeman
Required Signature/Registered Agent

10/14/12
Date: OCT 5 PM 1:27
TALLAHASSEE, FLORIDA

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