## P13000059837

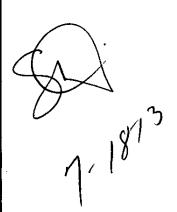
(Requestor's Name)				
(Ad	dress)			
(Ad	dress)			
(Cit	ry/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nan	ne)		
(Do	ocument Number)			
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				





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DIVISION OF CORPORATIONS

13 JUL 15 AM 9: 05

## **COVER LETTER**

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

SUBJECT:	RIVER CITY HANDYMAN SERVICES, INC.					
	(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u> )					
Enclosed are an ori	ginal and one (1) copy of the art	icles of incorporation and	d a check for:			
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	& Certificate of Status			
. •						
FROM:	Randall Fudge Name (Printed or typed)					
	211 Deleon Road					
	Address					
DeBary, FL 32713						
City, State & Zip						
	(407) 467–6 Daytime T	342 Telephone number				
	rdfudge@hotmail.com					
	<del>-</del>	ed 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)

	n shall be: River City H			
	CIPAL OFFICE rincipal street address		Mailing address, if di	fferent is:
211 Delec	on Road			
DeBary, F	L 32713			
CLE III PURPO			wful business	
irpose for which the	corporation is organized is: Ar	, and all la	WIGH Stormess	
	<u> </u>			
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		,		
CLE IV SHAR				
CLE IV SHAR umber of shares of ste				
imber of shares of sto	ock is:1		Dandall Fu	des /vd es Du
CLE V INITL  Name and Title:	ock is: 1 AL OFFICERS AND/OR DIRECT Randall Fudge/President	Name and Title	e: Randall Fuc	
imber of shares of sto	AL OFFICERS AND/OR DIRECT Randall Fudge/President 211 Deleon Road		211 Deleon Ro	oad
CLE V INITL  Name and Title:	ock is: 1 AL OFFICERS AND/OR DIRECT Randall Fudge/President	Name and Title		
CLE V INITL  Name and Title:  Address	AL OFFICERS AND/OR DIRECTOR  Randall Fudge/President  211 Deleon Road  DeBary, FL 32713	Name and Title Address:	211 Deleon Ro DeBary, FL	ad 32713
CLE V INITL  Name and Title:  Address  Name and Title:	AL OFFICERS AND/OR DIRECTOR  Randall Fudge/President  211 Deleon Road  DeBary, FL 32713	Name and Title Address:  Name and Title	211 Deleon Ro DeBary, FL	ad 32713
CLE V INITL  Name and Title:  Address  Name and Title:	AL OFFICERS AND/OR DIRECTOR  Randall Fudge/President  211 Deleon Road  DeBary, FL 32713	Name and Title Address:  Name and Title	211 Deleon Ro DeBary, FL	32713
CLE V INITL  Name and Title:  Address  Name and Title:	AL OFFICERS AND/OR DIRECTOR  Randall Fudge/President  211 Deleon Road  DeBary, FL 32713	Name and Title Address:  Name and Title	211 Deleon Ro DeBary, FL	32713
CLE V INITL  Name and Title:  Address  Name and Title:	AL OFFICERS AND/OR DIRECTOR  Randall Fudge/President  211 Deleon Road  DeBary, FL 32713	Name and Title Address:  Name and Title	211 Deleon Ro DeBary, FL	32713
CLE V INITL  Name and Title:  Address  Name and Title:  Address	AL OFFICERS AND/OR DIRECTOR  Randall Fudge/President  211 Deleon Road  DeBary, FL 32713	Name and Title Address:  Name and Title Address:	211 Deleon Ro  DeBary, FL	32713

Name and Title:		Name and Title:	<del></del>
Address		Address:	
			<del></del>
ARTICLE VI REG	ISTERED AGENT		
The name and Florida s	treet address (P.O. Box NOT acceptable) of	the registered agent is:	
Name:	Randall Fudge		
Address:	211 Deleon Road	-	
	DeBary, FL 32713	-	
ARTICLE VII INC	DRPORATOR		
The name and address of	of the Incorporator is:		
Name:	Randall Fudge		
Address: _	211 Deleon Road	-	
_	DeBary, FL 32713	-	
	registered agent to accept service of process iliar with and accept the appointment as reg		
Randall ?	Required Signature/Registered Agent		7-11-13
I submit this document document to the Departs	and affirm that the facts stated herein are nent of State constitutes a third degree felon	true. I am aware that the false infor	Date
Kandall "	Refuired Signature/Incorporator		7-11-13 Date