## P13000064824

(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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WB-4459

## **COVER LETTER**

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

<sub>suвлест:</sub> Ric	heson Service Someone	olutions, Inc.	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the ar	ticles 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	\$87.50 Filing Fee, Certified Copy & Certificate of Status DPY REQUIRED
FROM: <u>J</u>	ohn Richeson	e (Printed or typed)	
2	007 Northdolo Di	4440 لما	

3837 Northdale Blvd., #113

Address

Tampa, FL 33624

City, State & Zip

813-404-9795

Daytime Telephone number

jricheson@jrservicesolutions.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)

The name of the corpora	TE Richeson Service	Solutions, In	C.	
ARTICLE II PRINCIPAL OFFICE Principal street address 3837 Northdale Blvd.			ling address, if different is:	
#113	<u> </u>			
Tampa, FL 33	3624	<del></del>	<del></del>	
ARTICLE III PUR	<del></del>	· · · · · · · · · · · · · · · · · · ·		
The purpose for which t	he corporation is organized is:			
To perform wi	ndow cleaning, pressure c	leaning and	other similar	
commercial a	nd residential services in t	he state of F	lorida.	
***************************************				
			<del>.</del>	
			· · · · · · · · · · · · · · · · · · ·	
ARTICLE IV SHA	IRES 400		50 <u>~</u>	
The number of shares of	stock is: 100		3 AUG SECRET VLLAH	
		_	# <u>#</u> 55	7)
	IAL OFFICERS AND/OR DIRECTOR	<u>s</u>	57 97	
Name and Title	John Richeson - President	Name and Title:		Ö.
Address	3837 Northdale Blvd.	Address:		<del></del>
	#113			
	Tampa, FL 33624	<u> </u>		
Name and Title:		Name and Title:		
Address				
Address		_ Address		
		<del>.</del>		
				<del></del>
Name and Title:		Name and Title:		
· Address		_ Address:		

Name and	Title:	Name and Title:	_
Address		Address:	_
		<del> </del>	-
	<del></del>		_
ARTICLE VI	REGISTERED AGENT		
The name and Flo	rida street address (P.O. Box NOT acceptable) of	f the registered agent is:	
Name:	John Richeson	_	
Address:	3837 Northdale Blvd., #113	<del>-</del>	
	Tampa, FL 33624	_	
ARTICLE VII	INCORPORATOR		
The name and add	<u>dress</u> of the Incorporator is:		
Name:	John Richeson	_	
Address:	3837 Northdale Blvd., #113	_	
	Tampa, FL 33624	-	
Having been nam this certificate, I a	ed as registered agent to accept service of process m familiar with and accept the appointment as reg	s for the above stated corporation at the place designate gistered agent and agree to act in this capacity	l in
Solv	Kickbon	July 30, 2013	-
	Required Signature/Registered Agent	Date	
I submit this docu	ment and affirm that the facts stated herein are repertment of State constitutes a third degree felon	true. I am aware that the false information submitted any as provided for in s.817.155, F.S.	n a
	n Richeson	July 30, 2013	1
	Required Signature/Incorporator	Date	