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(Reques	tor's Name)				
(Address)					
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(City/Sta	nte/Zip/Phone #)				
PICK-UP	WAIT MAIL				
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates of Status				
AUTHORIZATION CORRECT add	DMAN GAVE				





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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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COVER LETTER

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

SUBJECT: RICHMAN INVESTMENT 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

\$78.75

Filing Fee

Filing Fee

& Certificate of Status

\$78.75

Filing Fee

\$87.50

& Certified Copy

Filing Fee, Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

οм·	Ilene H. Richman				
O1 V 1.	Name (Printed or typed)				
	36000 Portofino Circle, Suite 101				
•	Address				
	Palm Beach Gardens, FL. 33418				
	City, State & Zip				
	561-630-7975				
	Daytime Telephone number				
,	irichman@comcast.net E-mail address: (to be used for future annual report notification)				

NOTE: Please provide the original and one copy of the articles.



EFFECTIVE DATE 1/1/2014

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

The name of the corporat	tion shall be: RICHMAN INV	<u>/ESTMEN</u>	T & LAND INC.
36000 Porto	NCIPAL OFFICE Principal street address		Mailing address, if different is:
Suite 101			
	ardens, FL. 3348		
ARTICLE III PUR The purpose for which to and land inc	POSE the corporation is organized is: Huding financing of sa	sale of inve	estment properties ties
			218.
			OCT 2
			2 PM 4: 21
ARTICLE IV SHA	RES 100		4: 21
ARTICLE V INIT	stock is: TOU FIAL OFFICERS AND/OR DIRECTO		
	llene H. Richman	Name and Title	Edward Richman
Address	36000 Portofino Circle	Address:	36000 Portofino Circle
7 dates	Suite 101		Suite 101
	Palm Beach Gardens, FL. 33418		Palm Beach Gardens, FL. 33418
Name and Title:	***************************************	Name and Title	
Address		Address:	• • • • • • • • • • • • • • • • • • • •
· ·			
	•		
Name and Title:		Name and Title	<u> </u>
Address		Address:	

(conti.)

			SECRETARY OF STATE OIVISION OF CORPORATIONS
Name and Title:		Name and Title: Address:	2013 OCT 22 PM 4: 21
		•	
ARTICLE V	I REGISTERED AGENT		
	I Florida street address (P.O. Box NOT acceptable) o	f the registered agent is	:
Name:	llene H. Richman	_	
Address:	36000 Portofino Circle, Suite 101	_	
	Palm Beach Gardens, FL. 33418	_	
		_	
ARTICLE V	II INCORPORATOR		
The name and	address of the Incorporator is:		
Name;	llene H. Richman	_	
Address:	36000 Portofino Circle, #101	_	
	Palm Beach Gardens, FL. 33418	_	
		_	•
	named as registered agent to accept service of process , I am familiar with and accept the appointment as re		
(D 21 B. L.		Oct 12 2013
	Required Signature/Registered Agent		<u>904.12,2013</u>
	document and affirm that the facts stated herein are he Department of State constitutes a third degree felor		
10	Required Signature Ancorporator	 	Oct. 12 2013