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(Requestor's Name)

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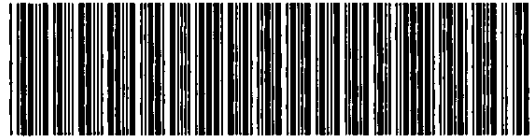
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

MAR 14 2014  
J. BRYAN

**COVER LETTER**

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

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14 MAR 12 PM 3:53  
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TALLAHASSEE FLORIDA

SUBJECT: Recchie Brothers Contracting, 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: Chris Recchie  
Name (Printed or typed)

3421 SW 16<sup>th</sup> St.  
Address

Ft. Lauderdale, FL 33312  
City, State & Zip

(561) 239-2065  
Daytime Telephone number

j-recchie@bellsouth.net  
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: Recchie Brothers Contracting, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

3421 SW 16<sup>th</sup> Ct.  
Ft. Lauderdale, Fl.  
33312

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: General Contracting work,  
home improvements, commercial + residential.

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Chris Recchie (P) Name and Title: \_\_\_\_\_

Address: 3421 SW 16<sup>th</sup> Ct. Address: \_\_\_\_\_  
Ft. Lauderdale, Fl.  
33312

Name and Title: Drake Allison (S) Name and Title: \_\_\_\_\_

Address: 3421 SW 16<sup>th</sup> Ct. Address: \_\_\_\_\_  
Ft. Lauderdale, Fl.  
33312

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

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SECRETARY OF STATE

(conti.)

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Chris Recchie  
Address: 3421 SW 16<sup>th</sup> Ct.  
Ft. Lauderdale, Fl. 33312

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**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Chris Recchie  
Address: 3421 SW 16<sup>th</sup> Ct.  
Ft. Lauderdale, Fl. 33312

*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*

  
Required Signature/Registered Agent

3-6-14  
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.*

  
Required Signature/Incorporator

3-6-14  
Date