## P14000041199

(Re	equestor's Name)	
(Ad	Idress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	o #)
PICK-UP	☐ WAIT	MAIL
<b>(</b> Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	



700260737457

06/02/14--01036--010 \*\*87.50

PR JUN -2 PM 2: 48

## **COVER LETTER**

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

SUBJECT: RJE Ruskin Heathcare Consulting INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

mar and one (1) copy of the arti	cres of incorporation and	I a CIRCE IOI.
\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
( 95Y) 3Y; Daytime To	7 - Z Z Y Z elephone number	
	S78.75 Filing Fee & Certificate of Status  Joshua Rusk Name  11318 Water  Oave Cl City,  (954)34  Daytime Te	Filing Fee & Certificate of Status  Filing Fee & Certified Copy

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 corporat	ion shall be: RJE	Kuskin Health	mare Consu	Iting Inc
	NCIPAL OFFICE Principal street address		Mailing address, if different	ent is:
1. [13]	18 Water oak p	lace		
Davie	, Florida 333	30		· · · · · · · · · · · · · · · · · · ·
ARTICLE III PURI The purpose for which the	POSE ne corporation is organized is:	marketing	+ CONSUH	\ <del>\</del>
				ND AN
<del></del>				
ARTICLE IV SHA				PM 2:
The number of shares of s	stock is:		_	5
ARTICLE V INIT	TAL OFFICERS AND/OR	DIRECTORS Q CES	( sent)	
Name and Title:	Joshua Allan	1 Roski Name and Titl	c:	
Address	11318 water	akel. Address:		
	Davie Florid	M 33330		
Name and Title:		Name and Title	e:	
Address		Address:		
Name and Title:	<del></del>	Name and Titl	c:	
Address			<del></del>	

Name a	nd Title:	Name and Title:	
Addres	s	Address:	
ARTICLE VI	REGISTERED AGENT lorida street address (P.O. Box NOT acceptable) of	the registered agent is:	
Name:	Joshua Ruskil		- <del>tra</del> **
Address:	11318 water our pro	و	NUC \$1
	Davie H 32330		-2
ARTICLE VII	INCORPORATOR		PM 2
The <u>name and a</u>	ddress of the Incorporator is:		
Name:	Joshua Ruska		
Address:	11318 water oak p	luce.	
	Davie, F1 33330		
	med as registered agent to accept service of process am familiar with and accept the appointment as regi		
	C 350		- 29 - 14 Date
	Required Signature/Registered Agent		Date
	cument and affirm that the facts stated herein are t Department of State constitutes a third degree felony		nation submitted in a
	( In fre	S	-29-14
	Required Signature/Incorporator		- 29 - 14 Date