P14000090585

(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:
Office Use Only



400265493094

400265493094 11/03/14--01035--001 **78.75

FILEU

4 NOV -3 PN 2: 2

SECRETARIA SELVATOR

n 11/09/14

I Robert J. Woodward release the name of R.J.W. Raw, Inc. to be reused.

Raley J Wooding

Robert J. Woodward

FILED
14 NOV -3 PH 2:

COVER LETTER

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

SUBJECT: K.J.	.W. RAW, INC.		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	rinal and one (1) copy of the art	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	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	DPY REQUIRED
i Kowi.		e (Printed or typed)	
<u>1</u>	1980 MCGREGO		·-
		Address	
<u>F</u>	ORT MYERS, FL		
23	City. 39-281-5482	State & Zip	
	Daytime T	elephone number	
	E-mail address: (to be use	d 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 corporate				
ARTICLE II PRINCIPAL OFFICE Principal street address 11980 MCGREGOR BLVD		Mailing address, if different is:		
ORT MYERS	S, FL 33919			
ARTICLE III PURI The purpose for which the	POSE ne corporation is organized is:	G AND TRANSPO	ORTATION	
	· • · · · · · · · · · · · · · · · · · ·			
RTICLE IV SHA the number of shares of s	stock is:		FILED NOV -3 PM 2: AND COLUMN SAND	
	TAL OFFICERS AND/OR DIRECTOR ROBERT J. WOODWARD - PRES		21 07	
Name and Title Address	11980 MCGREGOR BLVD			
Address	FORT MYERS, FL 33919			
Name and Title:		Name and Title:		
Address		Address:		
Name and Title:		Name and Title:		
Address		Address:		

Name an	d Title:	Name and Title:	
Address		Address:	
ARTICLE VI The name and F Name: Address:	REGISTERED AGENT Iorida street address (P.O. Box NOT acceptable) of ROBERT J. WOODWARD 11980 MCGREGOR BLVD FORT MYERS, FL 33919 INCORPORATOR	the registered agent is:	FILED 14 NOV -3 PM SEGNETATE AT LATE ASSERTED.
	Idress of the Incorporator is:		22
Name:	ROBERT J. WOODWARD		Pr 2
Address:	11980 MCGREGOR BLVD FORT MYERS, FL 33919		
this certificate, I	ned as registered agent to accept service of process am familiar with and accept the appointment as reg Woodward Required Signature/Registered Agent	istered agent and agree to ac	
	Required Signature/Registered Agent		Date
	rument and affirm that the facts stated herein are t Department of State constitutes a third degree felony		
Rebus	T working Required Signature/Incorporator		10-28-2014
	Required Signature/Incorporator		Date