

P15000026944

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15 MAR 20 AM 8:01
STATE OF FLORIDA
TALLAHASSEE

W15-16827

COVER LETTER

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

SUBJECT: **Right 2 Inspect 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 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: **Christopher M Follano**

Name (Printed or typed)

1849 Sw Hickock Terrace

Address

Port Saint Lucie, FL. 34953

City, State & Zip

772-360-5032

Daytime Telephone number

chrisfollano@aol.com

E-mail address: (to be used for future annual report notification)

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

To whom it may concern,

I Christopher M Follano, am the owner of the dissolved corporation "Right 2 Inspect Inc." And have no intention of reinstating this name.

Sincerely,

Christopher M Follano 2/27/2015

Christopher M Follano



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
15 MAR 20 PM 4:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

March 10, 2015

CHRISTOPHER M FOLLANO
1849 SW HICKOCK TERR
PORT SAINT LUCIE, FL 34953

SUBJECT: RIGHT 2 INSPECT INC.
Ref. Number: W15000016827

We have received your document for RIGHT 2 INSPECT INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Jessica A Fason
Regulatory Specialist II

Letter Number: 615A00004796

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: Right 2 Inspect Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1849 Sw Hickock Terrace

Port Saint Lucie, FL. 34953

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any and all lawful buisness

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Christopher M Follano

Name and Title: _____

Address 1849 Sw Hickock Terrace

Address: _____

Port Saint Lucie, FL 34953

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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TALLAHASSEE FLORIDA

(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: Christopher M Follano
Address: 1849 Sw Hickock Terrace
Port Saint Lucie, FL. 34953

ARTICLE VII INCORPORATOR


The **name and address** of the Incorporator is:

Name: Christopher M Follano
Address: 1849 Sw Hickock Terrace
Port Saint Lucie, FL. 34953

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

 3-17-15
Required Signature/Registered Agent 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.

 3-17-15
Required Signature/Incorporator Date

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TALLAHASSEE FLORIDA