

P15000071929

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

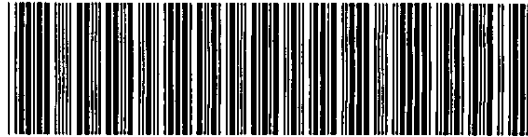
(Document Number)

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08/10/15--01019--008 \*\*78.75

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

15 AUG 28 AM 10:48

APPROVED  
AND  
FILED

11/1

## COVER LETTER

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

**SUBJECT:** RAYNE CORPORATION

(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:** John B. Rayne  
Name (Printed or typed)

609 Albee Road  
Address

Nokomis, FL 34275  
City, State & Zip

941-483-0027  
Daytime Telephone number

JRAYNE6886@AOL.COM  
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 14, 2015

JOHN B. RAYNE  
609 ALBEE ROAD  
NOKOMIS, FL 34275

SUBJECT: RAYNE CORPORATION  
Ref. Number: W15000054845

We have received your document for RAYNE CORPORATION and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Please return the corrected original and one copy of 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.

Valerie Herring  
Regulatory Specialist II  
New Filing Section

Letter Number: 315A00017229

APPROVED  
AND  
FILED

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Pro

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**ARTICLE I NAME**

The name of the corporation shall be:

RAYNE HOLDING CORPORATION

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

609 Albee Road

Nokomis, FL 34275

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: To carry on any activity which is legal for a corporation to carry on in the State of Florida.

**ARTICLE IV SHARES**

The number of shares of stock is: 1,000

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

Name and Title: John B. Rayne, President & Director

Name and Title: Patricia D. Rayne, Secretary & Director

Address 609 Albee Road

Address: 609 Albee Road

Nokomis, FL 34275

Nokomis, FL 34275

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

APPROVED  
AND  
FILED

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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: John B. Rayne  
Address: 609 Albee Road  
Nokomis, FL 34275

**ARTICLE VII INCORPORATOR**

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

Name: John B. Rayne  
Address: 609 Albee Road  
Nokomis, FL 34275

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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*

John B. Rayne 8-6-15  
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.*

John B. Rayne 8-6-15  
Required Signature/Incorporator Date