

P15000092899

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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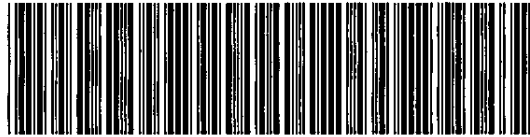
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
15 NOV 16 AM 11:22

W15 -073484

11/17/15



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED NOV 13 2015

November 6, 2015

DONALD MCMURRIAN
3059 JAMAICA ST.
SARASOTA, FL 34231

SUBJECT: RJT INC.
Ref. Number: W15000073484

We have received your document for RJT INC. 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.

The document number of the name conflict is L06000056673 (RJT, LLC).

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.

Thomas Chang
Regulatory Specialist II
New Filing Section

Letter Number: 915A00023553

FOR MORE INFORMATION, VISIT www.sunbiz.org OR CALL (850) 245-6052. IF YOU HAVE ANY QUESTIONS, PLEASE CALL (850) 245-6052.

COVER LETTER

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

SUBJECT: RJT 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: DONALD MCMURRIAN
Name (Printed or typed)

3059 JAMAICA ST.
Address

SARASOTA FLORIDA 34231
City, State & Zip

954 - 330 - 9437
Daytime Telephone number

~~donmcmurrian@~~ don.mcmurrian@yahoo.com
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: RJT Rehabilitation Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
3059 JAMAICA ST
SARASOTA FL 34231

Mailing address, if different is: _____

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to purchase and rehabilitate
distressed housing for resale

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: DONALD MCMURRIAN Name and Title: _____

Address 3059 JAMAICA ST. Address: _____
SARASOTA FL 34231

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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DIVISION OF CORPORATIONS
15 NOV 16 AM 11:22

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: DONALD MCMURRIAN
Address: 3059 JAMAICA ST.
SARASOTA FL 34231

ARTICLE VII INCORPORATOR

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

Name: DONALD MCMURRIAN
Address: 3059 JAMAICA ST.
SARASOTA FL 34231

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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

Donald McMurrian

Required Signature/Registered Agent

10-28-2015

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.

Donald McMurrian

Required Signature/Incorporator

10-28-2015

Date