

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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(((H16000000253 3)))



H16000000253ABCR

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To: Division of Corporations  
Fax Number : (850) 617-6381

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850) 205-8842  
Fax Number : (850) 878-5368

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

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16 JAN -4 AM 10:27

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FLORIDA PROFIT/NON PROFIT CORPORATION**

**Richland's Sustainable Agronomic Inc.**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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Corporate Filing Menu

Help

1/4/2016 9:39:22 AM From: To: 8506176381( 2/4 )

## COVER LETTER

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

**SUBJECT:** RICHLAND'S SUSTAINABLE AGRONOMIC 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:** RICHARD H. KIRKLAND  
Name (Printed or typed)  
403 FLAGLER RD.  
Address  
WINTER HAVEN, FL 33884  
City, State & Zip  
863-698-8328  
Daytime Telephone number  
richlandssa@mail.com  
E-mail address: (to be used for future annual report notification)

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

FILED  
16 JAN -4 AM 10:48  
TALLAHASSEE FLORIDA

1/4/2016 9:39:22 AM From: To: 8506176381( 3/4 )

EFFECTIVE DATE 01/01/16

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION**  
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME** RICHLAND'S SUSTAINABLE AGRONOMIC INC  
The name of the corporation shall be: \_\_\_\_\_

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
403 FLAGLER RD.  
WINTER HAVEN, FL 33884

Mailing address, if different is:

N/A

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: TO ENGAGE IN ANY LAWFUL ACTIVITY.

**ARTICLE IV SHARES**

The number of shares of stock is: 100 SHARES

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

Name and Title: RICHARD H. KIRKLAND, PRESIDENT

Name and Title: \_\_\_\_\_

Address: 403 FLAGLER RD.

Address: \_\_\_\_\_

WINTER HAVEN, FL 33884

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

1/4/2016 9:39:22 AM From: To: 8506176381( 4/4 )

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: RICHARD H. KIRKLAND  
Address: 403 FLAGLER RD.  
WINTER HAVEN, FL 33884

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: RICHARD H. KIRKLAND  
Address: 403 FLAGLER RD.  
WINTER HAVEN, FL 33884

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DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 1/1/2016 (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*

By: Richard H. Kirkland  
NRAT Services, Inc.  
Required Signature/Registered Agent

1/1/16  
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.*

Richard H. Kirkland  
Required Signature/Incorporator

1/1/16  
Date