

PI6000007397

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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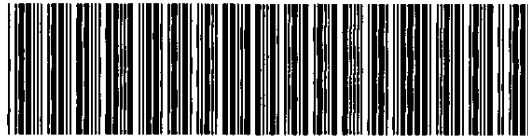
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
16 JAN 19 PM 1:08

JAN 19 2016

S. PRATHER

COVER LETTER

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

SUBJECT: RC Referral, 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: Lucille Martinehl
Name (Printed or typed)

668 Postrio Way
Address

Ocoee FL 34761
City, State & Zip

407 721 0264
Daytime Telephone number

lucy@realitycenterorlando.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: RC Referral, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

668 Postrio Way

Same

Ocoee FL 34761

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

For Florida licensed real estate agents to be
registered as independent contractors for the
purpose of providing real estate related
referrals. (RM)

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Lucille Martinelli/Pres Name and Title: _____

Address 668 Postrio Way Address: _____
Ocoee FL 34761

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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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: Lucille Martinelli

Address: 668 Postrio Way

Ocoee FL 34761

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Lucille Martinelli

Address: 668 Postrio Way

Ocoee FL 34761

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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

Lucille Martinelli

Required Signature/Registered Agent

1-14-16

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.

Lucille Martinelli

Required Signature/Incorporator

1-14-16

Date