## P/6000 85442

(Requestor's Name)			
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(City/State/Zip/Phone #)			
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PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

Office Use Only



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## FLORIDA DEPARTMENT OF STATE Division of Corporations

September 20, 2016

DERRICK D. CULVER 1800 N 35TH ST FT. PIERCE, FL 34947

SUBJECT: REVLUC DKASO Ref. Number: W16000065045

We have received your document for REVLUC DKASO 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 must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The document is illegible and not suitable for processing. Please correct and then resubmit the filing.

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.

Matthew T Moon Regulatory Specialist II

Letter Number: 616A00020206

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## **COVER LETTER**

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

SUBJECT:	REVLUC (PROPOSED CURPORA	DKASO ATE NAME - MUST INCL	UDE SUFFIX)	<u></u>
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	d a check for:	1
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
		e (Printed or typed)		I
	1800 N. 35 Ft. Pieico	Address	947 93	
	772 - L(C Daytime 1	Selephone number  Comail d for future annual report r	. con	

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)

The name of the corporation shall be:	REVLUC	DKASO	INC.
ARTICLE II PRINCIPAL OFFICE Principal street		Mailing addres	s, if different is:
1800 N. 35th Ft. Pierce, F			
ARTICLE III PURPOSE The purpose for which the corporation of the purpose for which the corporation of the purpose of the corporation of the corporation of the purpose of the corporation of the corporation of the purpose of the corporation of the corporation of the purpose of the corporation of the	is organized is: To	he State But not 1	Awful of imited eonet
Name and Title: Denkic			5 00 00 00 00 00 00 00 00 00 00 00 00 00
Name and Title: MArgai	ece, F(. 34947  Ret Culver VI	Address:  Ce Pras.  Name and Title:  Address:	57
Name and Title: PAMELA  Address 65  Vero	34947 + Mosley Sec	/Tres.  Name and Title:  Address:	

Name and Title:	Name and Title:
Address	Address:
···	
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box 1)  Name:  Address:    SOO   3	NOT acceptable) of the registered agent is:  D. Culver  5-4 St.  2, Fl 34947
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
Name: Derrick	ED. Culver
Address: 1800 V	<u>ce, Fl. 34947</u>
ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: (If an effective date is listed, the date must be says after the filing.)	. (OPTIONAL) specific and cannot be more than five business days prior or 90 business
Note: If the date inserted in this block does not not the document's effective date on the Department	neet the applicable statutory filing requirements, this date will not be listed as of State's records.
Having been named as registered agent to accept this certificate, I am familiar with and accept the	t service of process for the above stated corporation at the place designated in appointment as registered agent and agree to act in this capacity
Required Signature/Re	gistered Agent Date
I submit this document and affirm that the facts document to the Department of State constitutes	stated herein are true. I am aware that the false information submitted in a stated degree felony as provided for in s.817.155, F.S.
Required Signature/Incorporator	10(14/16 Date
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