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

From: Account Name : M. BURR KEIM COMPANY
Account Number : I19990000242
Phone : (215) 563-8113
Fax Number : (215) 977-9386

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

Email Address: _____

**DOMESTICATION
RAS2, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$128.75

N. SAMS

APR 18 2018

RECEIVED

2018 APR 17 PM 2:41

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SERVICES

CERTIFICATE OF DOMESTICATION

The undersigned, Reymond A. Sargenti, President
(Name) (Title)

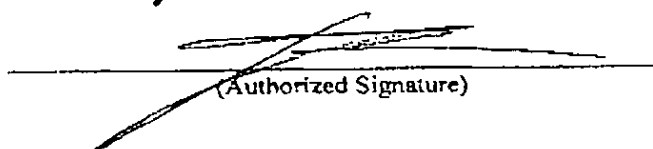
of RAS2, INC a foreign corporation,
(Corporation Name)

in accordance with s. 607.1801, Florida Statutes, does hereby certify:

1. The date on which corporation was first formed was September 27, 2010.
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was Ohio.
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was RAS2, INC.
4. The name of the corporation, as set forth in its articles of incorporation, to be filed pursuant to s. 607.0202 and 607.0401 with this certificate is RAS2, INC.
5. The jurisdiction that constituted the seat, siege social, or principal place of business or central administration of the corporation, or any other equivalent jurisdiction under applicable law, immediately before the filing of the Certificate of Domestication was Ohio.
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am President of RAS2, INC.

and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done so this the 13 day of APR 11, 2018.


(Authorized Signature)

Filing Fee:

Certificate of Domestication	\$ 50.00
Articles of Incorporation and Certified Copy	\$ 78.75
Total to domesticate and file	\$128.75

16 APR 17 PM 3:32

ARTICLES OF INCORPORATION
IN COMPLIANCE WITH CHAPTER 607, F.S.

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

RAS2, INC.

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:

Principal Address

Mailing Address

16951 Pine Ridge Road

P.O. Box 100684

Fort Myers, FL 33908

Cape Coral, FL 33910

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

To operate a car wash

18 APR 7 PM 3:32
TALLAHASSEE, FLORIDA

E-11

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ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS:

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

THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:

Title/Name

Reymond A. Sargenti, Director16951 Pine Ridge RoadFort Myers, FL 33908

Title/Name

Reymond A. Sargenti, President16951 Pine Ridge RoadFort Myers, FL 33908

Title/Name

Reymond A. Sargenti, Secretary16951 Pine Ridge RoadFort Myers, FL 33908

Title/Name

Reymond A. Sargenti, Treasurer16951 Pine Ridge RoadFort Myers, FL 33908

Title/Name

Title/Name

Title/Name

Title/Name

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ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS
THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS:

Reymond A. Sargenti
16951 Pine Ridge Road
Fort Myers, FL 33908

ARTICLE VII INCORPORATOR
THE NAME AND ADDRESS OF THE INCORPORATOR IS:

Reymond A. Sargenti
16951 Pine Ridge Road
Fort Myers, FL 33908

HAVING BEEN NAMED AS REGISTERED AGENT AND 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.

Signature/Registered Agent

4-13-18
Date

Signature/Incorporator

4-13-18
Date

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