

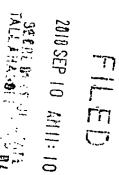
(Requestor's Name)				
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(Address)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



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U9/10/18--01025--006 \*\*78.75



SEP 1 1 2018

K. Brumbley

## **COVER LETTER**

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

SUBJECT: Rewer Construction. Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

Department of State

☐ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	Filing Fee & Certified Copy	Certified Cop & Certificate of Status
		ADDITIONAL CO	PY REQUIRED
FROM:	NEIL C. BL	e (Printed or typed)	
	5294 OVACHI	TA DRIVE Address	
	LAKE WORTH, F		
	(S(1) 860 - 03 Daytime T	27 Felephone number	
	RをルルセルーCASEY E-mail address: (to be use	Aff00, Co1	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	on shall be: RENVER CONST	RUCTION, INC		
<u>ARTICLE II PRINCI</u> I	PAL OFFICE Principal street address	Mailing addres	Mailing address, if different is:	
5294 OVAC				
LAKE WORTH,	FLORIDA 33467			
ARTICLE III PURPOS The purpose for which the	<u>SE</u> e corporation is organized is:( ರಿಸ	STRUCF10N		
			23 23 25 23	
			2016 SEP	
			0	
		<del></del>		
	S tock is: 100 . OFFICERS AND/OR DIRECTORS WEIL C. RENNER-PH	Name and Title	, 0	
	5294 OVACHITA DR.			
-	LAKE WORTH, FLORIDA			
-	33417			
Name and Title:_		Name and Title:		
Address _		Address:	<del> </del>	
- -				
Name and Title:_		Name and Title:		
Address _				
-				

	Mrs.	
Name and Title	e: NEIL C. RENNER A Name and Title:	
Address	S294 OVACHITA DR. Address:	
	LAKE WORTH, FLORISH 33+67	
ARTICLE VI REGIS	STERED AGENT	
	street address (P.O. Box NOT acceptable) of the registered agent is:	
Name:	NEIL C. RENNER	
Address:	S294 OVACHITA DRIVE	
	LAKÉ WORTH, FLORIM 33467	
	/	
<u>ARTICLE VII INCO</u>	<u>ORPORATOR</u>	
The name and address	§ of the Incorporator is:	
Name:	NEIL C. RENNER	
Address:	1294 OVAKHITA BRIVE	
	the LAKE WARTH, FLSEISH 33467	
	/	
ARTICLE VIII EFF	FECTIVE DATE:	
Effective date, if other (If an effective date is	than the date of filing: <u>SFITE/BER 6, 2018.</u> (OPTIONAL) s listed, the date must be specific and cannot be more than five days pr	ior or 90 days after the
filing.)	, ,	·
	rted in this block does not meet the applicable statutory filing requirements	, this date will not be listed as
the document's effective	ve date on the Department of State's records.	
Having been named as	s registered agent to accept service of process for the above stated corpore	ution at the place designated in
this certificate, I am fa	umiliar with and accept the appointment as registered agent and agree to ac	ct in this capacity
$\times$ 7	Required Signature/Registered Agent	9/05/18
	Required Signature/Registered Agent	Date
I submit this documen	nt and affirm that the facts stated herein are true. I am aware that the fa	dse information submitted in a
document to the Depar	rtment of State constitutes a third degree felony as provided for in s.817.15	5, F.S.
×_//	Well Come	9/05/18
Required S	Signature/Incorporator	Bate