

P20000028363

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

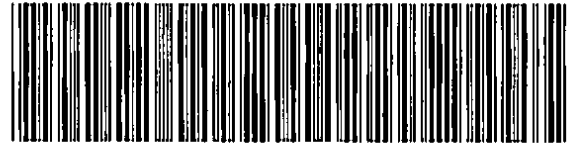
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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04/06/20--01025--005 **70.00

FILED
2020 APR -6 AM 7:47
STATE
INVESTMENT

COVER LETTER

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

SUBJECT: RSMILT INCORPORATED
(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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Robert McBrearty
Name (Printed or typed)

1374 DAKOTA DR.
Address

JUPITER, FL 33458
City, State & Zip

321-917-1896
Daytime Telephone number

BOBBY.MCBREARTY@GMAIL.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: RSMCT INCORPORATED

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1374 Dakota Dr. Jupiter, FL 33458

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Consulting Services

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Robert McBrearty - President Name and Title: _____

Address 1374 Dakota Dr. Address: _____

Jupiter, FL 33458

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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2020 APR -6 AM 7:47
CLERK OF DISTRICT COURT
JACKSONVILLE, FL

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: Robert McBrearty
Address: 1374 Dakota Dr.
Jupiter, FL 33458

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Robert McBrearty
Address: 1374 Dakota Dr.
Jupiter, FL 33458

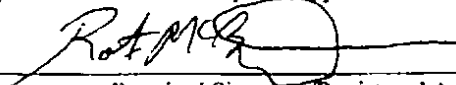
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 4/2/2020 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 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



Required Signature/Registered Agent

4/2/20

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.



Required Signature/Incorporator

4/2/20

Date