P20000038587

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
· (Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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COVER LETTER

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

SUBJECT:	ICRC		la, INC,	
	(PROPO	SED CORPORA	TE NAME - MUST INC	LUDE SUFFIX)
Enclosed are an orig	ginal and one (1)	copy of the art	icles of incorporation a	nd a check for:
≥ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate	of Status	□ \$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certified Copy & Certificate o Status OPY REQUIRED
		_		
FROM:	RJ	Rejna	e (Printed or typed)	
_	17392	Bal	Harbor Dr Address	
_	Winter	sorden Chy.	FL 34787 State & Zip	7
_	51	2 571 23	32 Telephone number	
	E-mail add	dress: (to be use	d 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)

The name of the corporat	ion shall be:	RC Ho	rida, /	VC		_
ARTICLE II PRINC	TIPAL OFFICE Principal street address		•		ess, if different is:	
17392 Bal H	orthore Dr		-			
winter Good	lon, PL 347	87				
	,	ed is:		Busines	Sig	
					· · · · · ·	
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					2020 HAY	
				 		<u> </u>
		 				
ARTICLE IV SHARI	<u>ES</u>				PH I:	
The number of shares of	stock is:				PM 1: 07	
ARTICLE V INITIA	L OFFICERS AND/OR	DIRECTORS			7	
Name and Title	Pardall F	eina, P	Name and	d Title:		
Addense	173A2 Roll	Hashor or				
l	Winter Guade	en FL	_		·	
		34787	_			
			_		·	
Name and Title:	Santingo Pers	/		d Title:		-
Address	7392 Bae A		Address:			<u> </u>
	Winter Gas	den Fl				· •
		4+81	_			
Name and Title:			Name and	d Title:		
Address						
,, ,,,,						•
		.	_	·		
						

Name and T	Title: Name and Title:
Address	Address:
	EGISTERED AGENT ida street address (P.O. Box NOT acceptable) of the registered agent is:
Name:	RJ Peine
Address:	17392 Bal Harbors Dr
- -	Wher Gurden FL 34787
<u>ARTICLE VII IN</u>	<u>CORPORATOR</u>
The name and addr	ress of the Incorporator is:
Name:	R5 Ding
Address:	17302 Bal Harbor Dr
	Wilter Guaden FL 34787
Effective date, if oth (If an effective date filing.)	her than the date of filing: 05/8/200. (OPTIONAL) e is listed, the date must be specific and cannot be more than five days prior or 90 days af
	serted in this block does not meet the applicable statutory filing requirements, this date will not ective date on the Department of State's records.
Having been named certificate, I am fam	I as registered agent to accept service of process for the above stated corporation at the place designates with and accept the appointment as registered agent and agree to act in this capacity
	1/1/1 //
/	Required Signature/Registered Agent / Date
I submit this docum	nent and affirm that the facts stated herein are true. I am aware that the false information si partment of State constitutes a third degree felony as provided for in s.817.155, F.S.
document to the Dep	
document to the Dep	1 /// oslip/s
Required Signature	Theoretical Date 05/16/2
document to the Dep	Theoretical Date 05/16/2

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