## P2100059495

(Requestor's Name)				
(Address)				
(Address)				
(Cit	ry/State/Zip/Phone	<del>;</del> #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



100367424911

06/22/21--01003--004 \*\*78.75

6/25/21



## **COVER LETTER**

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

SUBJECT: RICHTE EVAN PROPOSED CORPOR	S M C ATENAME - <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an original and one (1) copy of the a	rticles of incorporation and	l a check for:
□ \$70.00 □ \$78.75  Filing Fee Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status DPY REQUIRED
FROM: <u>Richie Evan</u>	S ne (Printed or typed)	
1071 S FIG	Address	

Wavehole Fla 33873

863 773 8377 Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

hardee roofing Inc & yahoo Com E-mail address: (to be used for luture annual report notification)

Address	
	Address:
RTICLE VI REGISTERED AGENT ne name and Florida street address (P.O. Box	NOT acceptable) of the registered agent is:
lame: Richie Evans	S(
.ddress: 10715 F1G	ave
Wauchula fi	4 × 33773
RTICLE VII INCORPORATOR	
he name and address of the Incorporator is:	
Name: Richir EVan	
Address: 1071 S F10	a cue
Wavcholo	F14 33873
RTICLE VIII EFFECTIVE DATE:	
ffective date, if other than the date of filing: f an effective date is listed, the date must be ling.)  ote: If the date inserted in this block does not.	. (OPTIONAL)  specific and cannot be more than five days prior or 90 days after the  meet the applicable statutory filing requirements, this date will not be listed as t of State's records.
If an effective date is listed, the date must be ling.)  iote: If the date inserted in this block does not be document's effective date on the Department daving been named as registered agent to accept	specific and cannot be more than five days prior or 90 days after the meet the applicable statutory filing requirements, this date will not be listed as
ffective date, if other than the date of filing:	specific and cannot be more than five days prior or 90 days after the meet the applicable statutory filing requirements, this date will not be listed as t of State's records.  Service of process for the above stated corporation at the place designated in this ointment as registered agent and agree to act in this capacity
frective date, if other than the date of filing:	specific and cannot be more than five days prior or 90 days after the meet the applicable statutory filing requirements, this date will not be listed as a of State's records.  I service of process for the above stated corporation at the place designated in this cointment as registered agent and agree to act in this capacity  Date  Its stated herein are true. I am aware that the false information submitted in a
fan effective date is listed, the date of filing:  f an effective date is listed, the date must be ling.)  ote: If the date inserted in this block does not be document's effective date on the Department daving been named as registered agent to accept vertificate, I am familiar with and accept the appearance of the submit this document and affirm that the fact	meet the applicable statutory filing requirements, this date will not be listed as a of State's records.  Service of process for the above stated corporation at the place designated in this cointment as registered agent and agree to act in this capacity  Date
ffective date, if other than the date of filing:  f an effective date is listed, the date must be ling.)  ote: If the date inserted in this block does not be document's effective date on the Department daving been named as registered agent to accept ertificate, I am familiar with and accept the appearance Signature/Resubmit this document and affirm that the fact occument to the Department of State constitutes of the state of the department of the Department of the Comment to the Department of State constitutes of the state of the st	specific and cannot be more than five days prior or 90 days after the meet the applicable statutory filing requirements, this date will not be listed as a of State's records.  I service of process for the above stated corporation at the place designated in this cointment as registered agent and agree to act in this capacity  Date  Its stated herein are true. I am aware that the false information submitted in a
ffective date, if other than the date of filing:	specific and cannot be more than five days prior or 90 days after the meet the applicable statutory filing requirements, this date will not be listed as a of State's records.  I service of process for the above stated corporation at the place designated in this cointment as registered agent and agree to act in this capacity  Date  Its stated herein are true. I am aware that the false information submitted in a
ffective date, if other than the date of filing:  f an effective date is listed, the date must be ling.)  ote: If the date inserted in this block does not be document's effective date on the Department daving been named as registered agent to accept crificate, I am familiar with and accept the appearance Signature/Resubmit this document and affirm that the fact occument to the Department of State constitutes of the state of the department o	specific and cannot be more than five days prior or 90 days after the meet the applicable statutory filing requirements, this date will not be listed as a of State's records.  I service of process for the above stated corporation at the place designated in this cointment as registered agent and agree to act in this capacity  Date  Its stated herein are true. I am aware that the false information submitted in a
ffective date, if other than the date of filing:  f an effective date is listed, the date must be ling.)  ote: If the date inserted in this block does not be document's effective date on the Department daving been named as registered agent to accept crificate, I am familiar with and accept the appearance Signature/Resubmit this document and affirm that the fact occument to the Department of State constitutes of the state of the department o	specific and cannot be more than five days prior or 90 days after the meet the applicable statutory filing requirements, this date will not be listed as a of State's records.  I service of process for the above stated corporation at the place designated in this cointment as registered agent and agree to act in this capacity  Date  Its stated herein are true. I am aware that the false information submitted in a
factive date, if other than the date of filing:  f an effective date is listed, the date must be ling.)  ote: If the date inserted in this block does not be document's effective date on the Department daving been named as registered agent to accept the appear of the a	specific and cannot be more than five days prior or 90 days after the meet the applicable statutory filing requirements, this date will not be listed as a of State's records.  I service of process for the above stated corporation at the place designated in this cointment as registered agent and agree to act in this capacity  Date  Its stated herein are true. I am aware that the false information submitted in a

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME The name of the corporat	ion shall be: Richie E	lans in	<u>C.</u>
1071 St	Principal street address	<u> </u>	tailing address, if different is:
	exporation is organized is: 10 Ri(		
ARTICLE IV SHARI The number of shares of	ES stock is: 100 org		
ARTICLE V INITIA	LOFFICERS AND/OR DIRECTORS	Address:	Prisident 1071 S Fig Que Wauchula Fig
Name and Title: Address	33873	Name and Title:_	33873
Name and Title: Address			