

P2100041995

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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

From:  
Account Name : HUBCO  
Account Number : 104662003400  
Phone : (516)935-3940  
Fax Number : (516)935-3088

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

Email Address: CHARLESCAREY20GMAIL.COM

2021 DEC -6 PM 12:33

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FLORIDA PROFIT/NON PROFIT CORPORATION  
REFLECTIVE ART INC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$78.75

2021 DEC -6 PM 12:57

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: REFLECTIVE ART INC

**ARTICLE II PRINCIPAL OFFICE**  
Principal street address Mailing address, if different is:  
4321 RUMMELL ROAD  
ST. CLOUD, FL 34769

**ARTICLE III PURPOSE**  
The purpose for which the corporation is organized is: ANY LEGAL OR LAWFUL PURPOSE

**ARTICLE IV SHARES**  
The number of shares of stock is: 1,500 AT NO PAR VALUE

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

Name and Title:	CHARLES L CAREY - PRESIDENT	Name and Title:	JOLENE CAREY - VICE PRESIDENT
Address	4321 RUMMELL ROAD ST. CLOUD, FL 34769	Address:	4321 RUMMELL ROAD ST. CLOUD, FL 34769
Name and Title:		Name and Title:	
Address		Address:	
Name and Title:		Name and Title:	
Address		Address:	

2021-12-06 PM 2:57

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

CHARLES L CAREY

4321 RUMMELL ROAD

ST. CLOUD, FL 34769

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

CHARLES L CAREY

4321 RUMMELL ROAD


ST. CLOUD, FL 34769

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_. (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*



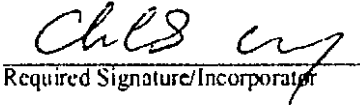
Required Signature/Registered Agent

CHARLES L CAREY

DECEMBER 2, 2021

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

CHARLES L CAREY

DECEMBER 2, 2021

Date

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