

P24/0000046890

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

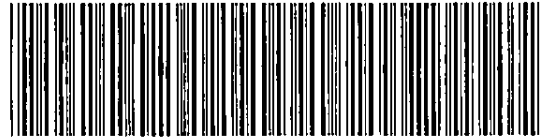
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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2024 JUL 17 AM 9:47
FALLAHASSEE, FL
07/15/24--01021-011

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2024 JUL 15 PM 3:04
FALLAHASSEE, FLORIDA

W24000102801

COVER LETTER

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

SUBJECT: Rime Inc
(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

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: Eddie L Thomas Jr
Name (Printed or typed)

3601 Grubbs St
Address

Mount Dora FL 32757
City, State & Zip

407-203-6848
Daytime Telephone number

Rime.Inc@gmail.com
E-mail address: (to be used for future annual report notification)

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

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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:

Rime Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

3601 Grubbs St

Mailing address, if different is:

Mount Clara Fl 32757

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

all business that is lawful

ARTICLE IV SHARES

The number of shares of stock is:

5000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

Eddie L Thomas

Name and Title:

Address

3601 Grubbs St

Address:

Mount Clara Fl 32757

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

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2024 JUL 7 AM 9:47
CLERK OF DISTRICT COURT
JUL 7 2024

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: Eddie L Thomas Jr

Address: 3601 Grubbs St
Mount Dora FL 32757

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Eddie L Thomas Jr

Address: 3601 Grubbs St
Mount Dora FL 32757

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STATE
OF FLORIDA
TALLAHASSEE, FL

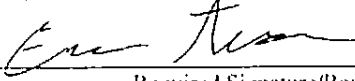
ARTICLE VIII EFFECTIVE DATE:

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.)

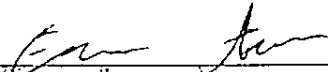
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

7/17/24
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

7/17/24
Date

Rimes LLC give permission for Eddie Thomas to
use rimes business name. document number L2300049006

I will not revoke voluntary dissolution

Rayan Luann Jan

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CLERK OF COURT
JULIA A. LEE
CLERK OF COURT