P97000022108

TRANSMITTAL LETTER

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

SUBJECT: Re	elocation Inspe	ection Services $\mathcal J$	ne-	
		name - must include su		
			30000 -03 **	021040933 3/04/9701112004 ****78.75 *****78.75
Enclosed is an original for:	and one (1) cop	by of the articles of	incorporation a	nd a check
\$70.00	X \$78.75	\$122.50	\$131.25	
Filing Fee	Filing Fee & Certificate	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate	
				4-2011 L6
FROM:	Curt	B. Cobbum		1
	Name (printed or typed)			
	P. O.	P. O. Box 916677		PH 3:
		Address		12 12
	Longwo	Longwood, FL 32791		•
	•	City, State & Zip		\ ,
	(407)	(407) 788-31.00		Den'
Daytime Telephone				(QIS
		9)	Jou Coffers	m selver.
			chr.	

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



The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Relocation Inspection Services Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

P. O. Box 916677 Longwood, FL 32791

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

One

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Curt B. Cobbum 538 Orange Drive, Ste. 17 Altamonte Springs, FL 32701

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Curt B. Cobbum
538 Orange Drive, Ste. 17
Altamonte Springs, FL 32701

The unde	rsigned	incorporator(s) h	as(have) execute	d these Articles of Ir	corporation this
	28th	day of	February	, 19 <u>97</u> .	
		Crest	B, Coff	um	·
			Signature		

Articles of Incorporation Filing Fee - \$35

Signature

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1.	The name of t	he corporation is:	Relocation 1	Inspection Servic	es InC
2.	The name and	- I address of the reg	istered agent a	and office is:	97 11.1
	Curt B. Cobbum (Name)				
	_		Drive, Ste. 1 . Box not accept		3: 12 —
		Altamonte S	prings, FL 33 (City/State/Zip)	2701	
at th to m	aving been name ove stated conce e appointment comply with the ance of my dut s registered ago	med as registered a poration at the plac as registered agen he provisions of all s ies, and I am familia ent.	ant and to so	cept service of pro n this certificate, I act in this capacity g to the proper and ept the obligations	cess for the hereby accept . I further agree I complete perfor- of my position
-	(lu	ut B Colb Signature)	um	February 28,	