

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Eastern Financial Services, Inc.
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

William Orlando

Name of Person

Eastern Financial Services, Inc.

Firm/Company

49 Sherwood Terrace

Address

Old Saybrook, CT. 06475

City/State and Zip code

wjorlando@snet.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

William Orlando

Name of Person

at (860) 388-7590

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy

FILED
16 APR 21 AM 7:47
SECRETARY OF STATE
TALLAHASSEE FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 14, 2014

WILLIAM ORLANDO
EASTERN FINANCIAL SERVICES, INC.
49 SHERWOOD TERRACE
OLD SAYBROOK, CT 06475

SUBJECT: EASTERN FINANCIAL SERVICES, INC.
Ref. Number: W14000016453

RECEIVED
FILED
14 APR 21 PM 3:37
TALLAHASSEE, FLORIDA
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for EASTERN FINANCIAL SERVICES, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

The document number of the name conflict is #L12000009154, EASTERN FINANCIAL SERVICES, LLC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Joey Bryan
Regulatory Specialist II Supervisor

Letter Number: 314A00005570

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

FILED
14 APR 21 AM 7:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Eastern Financial Services, Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

Eastern Lending Services, Inc.

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Connecticut

(State or country under the law of which it is incorporated)

3. 26-0900916

(FEI number, if applicable)

4. 9/16/2007

(Date of incorporation)

5. perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. 2/25/2014

(Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 49 Sherwood Terrace, Old Saybrook, Ct. 06475

(Principal office address)

49 Sherwood Terrace, Old Saybrook, Ct. 06475

(Current mailing address)

8. Any lawful purpose

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Pauline Orlando

Office Address: 459 E. Tangerine SQ

Vero Beach

(City)

, Florida 32968

(Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Pauline Orlando

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: William Orlando

Address: 49 Sherwood Terrace, Old Saybrook, Ct. 06475

Vice Chairman: Pauline Orlando

Address: 459 E. Tangerine SQ
Vero Beach, FL. 32968

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: William Orlando

Address: 15 Seacrest Road
Old Saybrook, CT. 06475

Vice President: Pauline Orlando

Address: 459 E. Tangerine SQ
Vero Beach, FL. 32968

Secretary: Pauline Orlando

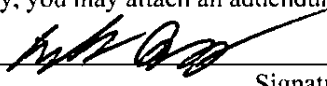
Address: 459 E. Tangerine SQ, Vero Beach, FL. 32968

Treasurer: William Orlando

Address: 15 Seacrest Road, Old Saybrook, CT. 06475

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. _____



Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that 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.

14. William Orlando, Its President

(Typed or printed name and capacity of person signing application)

FILED
14 APR 21 AM 7:47
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State, and keeper of the seal thereof,
DO HEREBY CERTIFY, that the certificate of incorporation of

EASTERN FINANCIAL SERVICES, INC.

a domestic STOCK corporation, was filed in this office on September 13, 2007.

A certificate of dissolution has not been filed, the corporation has filed all annual reports, and so far as indicated by the records of this office such corporation is in existence.



Secretary of the State

Date Issued: February 27, 2014