

TRANSMITTAL LETTER

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FILED

01 JUN 14 AM 9:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

SUBJECT:

Eagle Eye Investigation & Collection Agency Inc
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

200004419972--5
-06/14/01--01063--019
*****78.75 *****78.75

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate of Status

☒ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM:

MARCIA Clomitt
Name (Printed or typed)

416 Winter Lane
Address

Palm Bch Gardens FL 33410
City, State & Zip

561-863-5511
Daytime Telephone number

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

D. BROWN JUN 1, 8 2001

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:

Eagle Eye Investigation & Collection Agency Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

44 East Blue Heron Blvd
Riviera Bch Fla 33404

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Collection, Repo, Investigation Service

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

CEO. MARCIA Chemmitt - 416 Winter Lane PB6 Fla 33410
Vice & Treasurer - Cheryl Shapiro - 180 Lakeview Ave Malverne NY
Sec - Robyn Castro - 416 Winter Lane PB6 Fla 33410

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

MARCIA Chemmitt
416 Winter Lane
Palm Bch Gardens Fla 33410

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MARCIA Chemmitt
416 Winter Lane
Palm Bch Gardens Fla 33410

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

Signature/Registered Agent

Date

Signature/Incorporator

Date

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