

PD2000120674

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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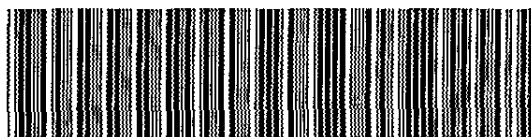
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: ECLIPSE 1, INC.
(Proposed corporate name - must include suffix)

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

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: OCCIE NETTLES, JR.
Name (Printed or typed)

2939 CENTRAL AVENUE
Address

ST. PETERSBURG, FL 33713
City, State & Zip

727-481-6384
Daytime Telephone number

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

ECLIPSE I. INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2939 CENTRAL AVENUE

ST. PETERSBURG, FL 33713

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY LAWFUL BUSINESS.

ARTICLE IV SHARES

The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

OCCIE NETTLES, JR.

2939 CENTRAL AVENUE

ST. PETERSBURG, FL 33713

DAVID MOTT

4301 34th ST. S., G-13

ST. PETERSBURG, FL 33711

ALAN PERRY

758 40th AVENUNE SOUTH

ST. PETERSBURG, FL 33705

ARTICLE VI REGISTERED AGENT

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

SEDRIC MACK

3555 GLOSSY IBIS COURT

PALM HARBOR, FL 34683

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

OCCIE NETTLES, JR.

2939 CENTRAL AVENUE

ST. PETERSBURG, FL 33713

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