

P030000027787

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TRANSMITTAL LETTER

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

SUBJECT: MediaEclectic InterNational, 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
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: George G. Carlile, Jr.
Name (Printed or typed)

624 Trinidad Court
Address

Winter Park, FL 32792-4907
City, State & Zip

407-679-2225
Daytime Telephone number

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

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:

MediaEclectic InterNational, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

624 Trinidad Court
Winter Park, FL 32792-4907

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Digital Media

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

George G. Carlile Jr
624 Trinidad Court
Winter Park, FL 32792-4907
President

ARTICLE VI REGISTERED AGENT

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

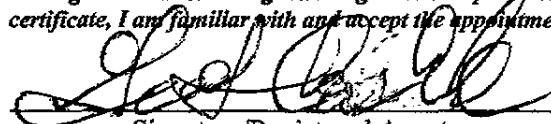
George G. Carlile, Jr.
624 Trinidad Court
Winter Park, FL 32792-4907

ARTICLE VII INCORPORATOR

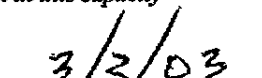
The name and address of the Incorporator is:

George G. Carlile, Jr.
624 Trinidad Court
Winter Park, FL 32792-4907

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



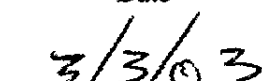
Signature/Registered Agent



Date



Signature/Incorporator



Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA