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(Requestor's Name)

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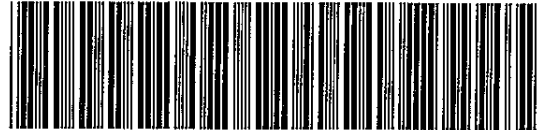
(Business Entity Name)

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TRANSMITTAL LETTER

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

SUBJECT: Essential Consults, 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: J. DAVID Tolot
Name (Printed or typed)

2595 SE 48TH ST
Address

Ocala, FL 34480
City, State & Zip

352-427-6406
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 NAMEThe name of the corporation shall be: **ESSENTIAL CONSULTS, Inc****ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

**2595 SE 48th ST
Ocala, Florida 34480****ARTICLE III PURPOSE**The purpose for which the corporation is organized is: **Consulting Services****ARTICLE IV SHARES**The number of shares of stock is: **1,000****ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

**J. DAVID Toler Pres. Treas.
Barbara S. Toler Sec. Vice President****ARTICLE VI REGISTERED AGENT**The name and Florida street address of the registered agent is:**J. DAVID Toler
2595 SE 48th ST
Ocala, FL 34480****ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:**J. David Toler
2595 SE 48th ST.
Ocala Florida 34480**

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**4/7/04**

Date

Signature/Incorporator**4/7/04**

DateFILED
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