

PO4000104392

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

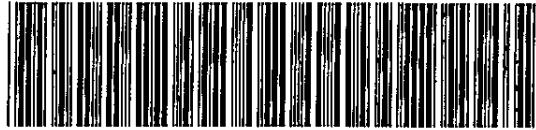
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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TRANSMITTAL LETTER

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

Subject: ELIN ERICKSON, INC.
(Proposed corporate name - must include suffix)

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

 X \$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: ELIN ERICKSON
Name (printed or typed)
1175 RUE DES CHATEAUX # 2A
Address
SOUTH PASADENA, FL 33707
City, State & Zip
727-344-0695
Daytime Telephone number

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

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be

ELIN ERICKSON, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

1175 RUE DES CHATEAUX #2A
SOUTH PASADENA, FL 33707

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

ONE THOUSAND SHARES OF ONE DOLLAR PAR VALUE COMMON
STOCK

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ELIN ERICKSON
1175 RUE DES CHATEAUX #2A
SOUTH PASADENA, FL 33707

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ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

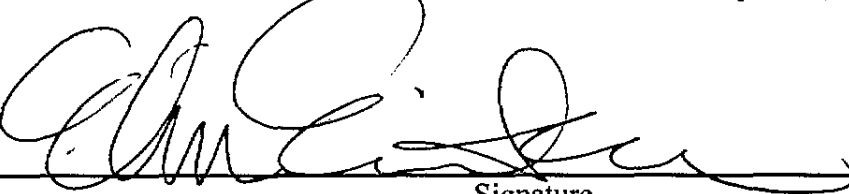
The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

ELIN ERICKSON
1175 RUE DES CHATEAUX #2A
SOUTH PASADENA, FL 33707

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

1ST day of JULY, 2004

(An additional article must be added if an effective date is requested)



Signature

Signature

Signature

Notarization is not required

Note: Affixing an officer title after signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the corporation is: *ELIN ERICKSON, PNL*

1. The name and address of the registered agent and office is:

ELIN ERICKSON

(Name)

1175 RUE DES CHATEAUX #2A

(P.O. Box or Mail Drop Box Not Acceptable)

SOUTH PASADENA, FL 33707

(City/State/Zip)

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RECEIVED
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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



(Signature)

6/29/04

(Date)