

PO60000040386

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

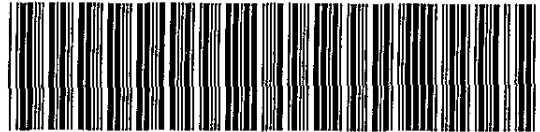
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2006 MAR 20 AM 10:28
CLERK OF STATE
TALLAHASSEE FLORIDA

3/21/06

COVER LETTER

FILED

2006 MAR 20 AM 10:28

SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

SUBJECT: Excellence Support 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: Eloisa Blanco
Name (Printed or typed)

6500 Kendale Lake Dr #110
Address

Miami FL 33183
City, State & Zip

786-853-5395
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: *Excellence Support, I.N.C.*

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

*6500 Kendale Lake Dr #11
Miami FL 33183*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Provide Services to Disabilities

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

*President — Eloisa Blanco.
6500 Kendale Lake Dr #110
Miami FL 33183*

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

*Eloisa Blanco
6500 Kendale Lake Dr. #110
Miami FL 33183*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*Eloisa Blanco
6500 Kendale Lake Dr. #110
Miami FL 33183*

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]

Signature/Registered Agent

[Signature]

Signature/Incorporator

CLERK OF STATE
TALLAHASSEE FLORIDA

2006 MAR 20 AM 10:28

FILED

03/12/06

Date

03/12/06

Date