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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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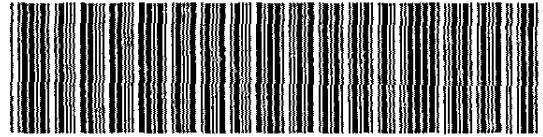
(Business Entity Name)

(Document Number)

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07 MAR -5 AM 11:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers MAR 06 2007

COVER LETTER

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

SUBJECT: Erla M. Pereira Enterprises, 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: Erla M. Pereira

Name (Printed or typed)

5649 N. Dean Road

Address

Orlando, FL 32817

City, State & Zip

407-677-8244

Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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:

Erla M. Pereira Enterprises, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

5649 N. Dean Road, Orlando, FL 32817

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To market consumer products and conduct any related business allowed by the laws of the state of Florida.

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):

Erla M. Pereira, 5649 N. Dean Road, Orlando, FL 32817

ARTICLE VI REGISTERED AGENT

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

Erla M. Pereira, 5649 N. Dean Road, Orlando, FL 32817

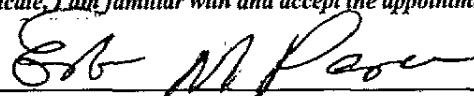
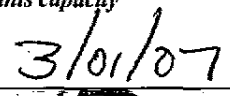


ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Erla M. Pereira, 5649 N. Dean Road, Orlando, FL 32817

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TALLAHASSEE, FLORIDA

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