

PD80000006081

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

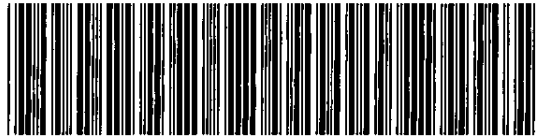
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Deborah Longarello GAVE
AUTHORIZATION BY PHONE TO
CORRECT *Articles II, III + VII*
DATE *1/16/08*
DOC. EXAM *MRD*

Office Use Only



900113731999

01/07/08--01009--010 **78.75

FILED

08 JAN 16 AM 11:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRD
1/17

1018-832

COVER LETTER

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

SUBJECT: ELOR CORP.

(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: DEBORAH LONGARELLO

Name (Printed or typed)

14219 MISSOURI SKYLARK ROAD

Address

WEEKI WACHEE, FL 34614

City, State & Zip

352-279-0643

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
08 JAN 16 AM 8:00
DIVISION OF CORPORATIONS

January 8, 2008

DEBORAH LONGARELLO
14219 MISSOURI SKYLAKR ROAD
WEEKI WACHEE, FL 34614

SUBJECT: ELOR CORP.
Ref. Number: W08000000832

We have received your document for ELOR CORP. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Complete the address for the officers, registered agent and the incorporator. Only one registered agent is required.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6879.

Ruby Dunlap
Regulatory Specialist II
New Filing Section

Letter Number: 708A00001438

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:

ELOR PRODUCTS, CORP. *DL 1/12/08*

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

14219 MISSOURI SKYLARK ROAD, WEEKI WACHEE, FL 34614

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

FOR PROFIT BUSINESS

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):

DEBORAH LONGARELLO

14219 MISSOURI SKYLARK ROAD, WEEKI WACHEE, FL 34614

PRESIDENT

STEPHEN LONGARELLO

14219 MISSOURI SKYLARK ROAD, WEEKI WACHEE, FL 34614

VICE PRESIDENT

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08 JAN 16 AM 11:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

DEBORAH LONGARELLO, 14219 MISSOURI SKYLARK ROAD

WEEKI WACHEE, FL 34614

ARTICLE VII INCORPORATOR

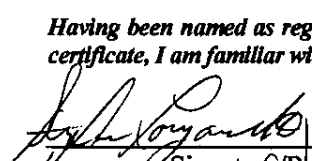
The name and address of the Incorporator is:

DEBORAH LONGARELLO, 14219 MISSOURI SKYLARK ROAD

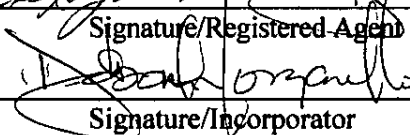
WEEKI WACHEE, FL 34614

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SECRETARY OF STATE
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



Signature/Incorporator

1/2/2008
Date

1/2/2008
Date