

P08000069786

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

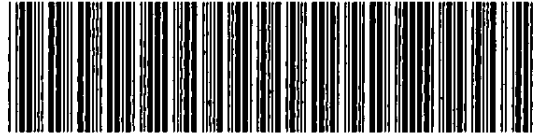
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2008 JUL 23 A 10:31

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

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

SUBJECT: ESCOBAR SEMINARS, 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      ☐ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                            & Certificate of  
                            Status  
**ADDITIONAL COPY REQUIRED**

FROM: EDWARD ESCOBAR  
Name (Printed or typed)

6514 STEEPLECHASE ROAD  
Address

TAMPA, FL 33625  
City, State & Zip

(813) 891-6614  
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)

**FILED**

2008 JUL 23 A 10:32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

ESCOBAR SEMINARS, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal street address and mailing address, if different is:

6514 STEEPLECHASE ROAD  
TAMPA, FL 33625

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

TRAINING

**ARTICLE IV SHARES**

The number of shares of stock is:

60,000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

PST  
EDWARD ESCOBAR  
6514 STEEPLECHASE ROAD  
TAMPA, FL 33625

**ARTICLE VI REGISTERED AGENT**

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

EDWARD ESCOBAR  
6514 STEEPLECHASE ROAD  
TAMPA, FL 33625

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

EDWARD ESCOBAR  
6514 STEEPLECHASE ROAD  
TAMPA, FL 33625

\*\*\*\*\*

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

x Edward Escobar  
Signature/Registered Agent

x 7/20/2008  
Date

x Edward Escobar  
Signature/Incorporator

x 7/20/2008  
Date