

PO8000093047

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

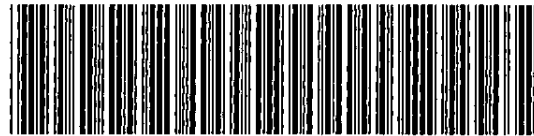
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Certified Copies _____

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FILED
08 OCT 13 AM 2:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

[Handwritten signature]

COVER LETTER

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

SUBJECT: EAGLE CONTROL SYSTEMS INT'L 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:

LEON SIMONIAN

Name (Printed or typed)

6916 NW 166 TERRACE

Address

MIAMI LAKES FL 33014

City, State & Zip

305-888-1323

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:

EAGLE CONTROL SYSTEMS INT'L
INC

ARTICLE II PRINCIPAL OFFICE

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

8607 NW 66 ST
MIAMI, FL 33166

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

A PROFESIONAL CORPORATION
FOR DESIGN OF INDUSTRIAL
EQUIPMENT.

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):

LEON SIMONIAN P/S

ARTICLE VI REGISTERED AGENT

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

LEON SIMONIAN
6916 NW 166 TERRACE
MIAMI LAKES, FL 33014

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

LEON SIMONIAN
6916 NW 166 TERRACE
MIAMI LAKES, FL 33014

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

10-10-08

Date



Signature/Incorporator

10-10-08

Date

FILED
08 OCT 13 AM 2:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA