

P11000003987

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

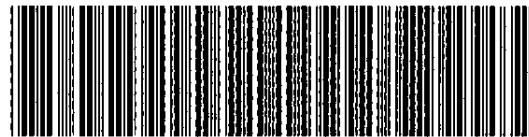
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

*Elizabeth Rescak* GAVE  
AUTHORIZATION BY PHONE TO  
CORRECT *Article IV*  
DATE *1/13/11*  
DOC. EXAM *MRD*

Office Use Only



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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

MRD  
1/13/11

## COVER LETTER

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

SUBJECT: Elite News Now 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: Elizabeth Mara Lesiak  
Name (Printed or typed)  
4372 27th SW 103  
Address  
Naples Florida 34116  
City, State & Zip  
313-269 6050 cellular  
Daytime Telephone number  
John@LansatCPA.com  
E-mail address: (to be used for future annual report notification)

**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: Elite News Now, Inc

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
27950 Industrial St  
Bonita Springs  
Florida 34135

Mailing address, if different is:  
4372 27th SW 103  
Naples Florida 34116

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

online press release for businesses

**ARTICLE IV SHARES**

The number of shares of stock is: 1001

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

Name and Title: Albert Van Houtte  
Address: 24456 Riverwood Dr  
Franklin Michigan 48025

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: Elizabeth Lesiak  
Address: 4372 27th SW 103  
Naples, Florida 34116

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Elizabeth Lesiak  
Address: 4372 27th SW 103  
Naples, Florida 34116

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

Elizabeth Mara Lesiak  
Required Signature/Registered Agent

1-7-11  
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Elizabeth Mara Lesiak  
Required Signature/Incorporator

1-7-11  
Date

