

P11000035296

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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04/08/11--01013--024 *4600

SECRETARY OF STATE
TALLAHASSEE, FL 32399

11 APR -8 AM 7:52

APPROVED
AND
FILED

COVER LETTER

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

SUBJECT: e Financial Assistance 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: Sulamita Del Valle

Name (Printed or typed)

5598 Pats Point

Address

Winter Park Florida 32792

City, State & Zip

407-879-5623

Daytime Telephone number

sulamita.delvalle@gmail.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: e Financial Assistance Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
5598 Pats Point
Winter Park Fl, 32792

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To assist customers with credit counseling and credit repair.

ARTICLE IV SHARES

The number of shares of stock is 50000.00

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Luis D. Del Valle
Address: 5598 Pats Point
Winter Park Fl, 32792

Name and Title: President
Address: _____

Name and Title: Sulamita Del Valle
Address: 5598 Pats Point
Winter Park Fl, 32792

Name and Title: Vice President
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:

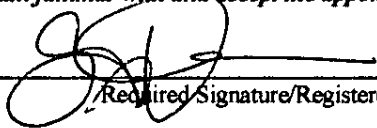
Name: Sulamita Del Valle
Address: 5598 Pats Point
winter Park Fl, 32792

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Sulamita Del Valle
Address: 5598 Pats Point
winter Park Fl, 32792

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

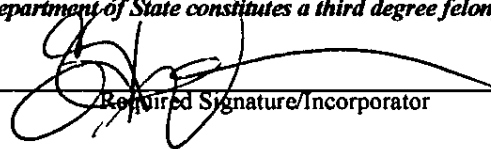


Required Signature/Registered Agent

04/03/20011

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.



Required Signature/Incorporator

04/03/20011

Date

APR 3 2011
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

5598 Pats Point
Winter Park FL, 32792

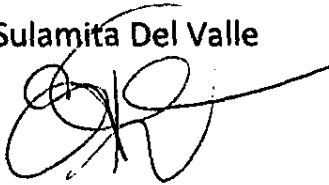
April 4, 2011

Hello

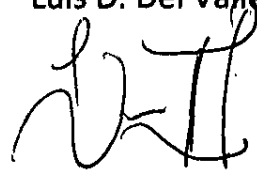
Sulamita Del Valle and Luis D. Del Valle write this letter to state that we will not be renewing e Financial Assistance and would like to release the name e Financial Assistance Inc. Sulamita Del Valle and Luis Del Valle have also sent a money order for the amount of \$78.75 with new incorporation papers. Please let us know if you need any other documents (407) 879-5623.

Thank you

Sulamita Del Valle



Luis D. Del Valle



SECRETARY OF STATE
TALLAHASSEE, FL 32399

11 APR -8 AM 7:52

APR 11 2011
FILED