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## COVER LETTER

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

SUBJECT: EYMFMS 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

FROM: RAYMOND NEIL  
Name (Printed or typed)

4805 KINGSTON CIRCLE  
Address

KISSIMMEE FLORIDA 34746  
City, State & Zip

407 397 7961  
Daytime Telephone number

NFUSUN@YAHOO.COM  
E-mail address: (to be used for future annual report notification)

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



RECEIVED

11 JUN 13 AM 11:09

DIVISION OF CORPORATIONS

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 27, 2011

RAYMOND NEIL  
4805 KINGSTON CIR  
KISSIMMEE, FL 34746

SUBJECT: EYFMS INC.  
Ref. Number: W11000029436

We have received your document for EYFMS INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please complete Article(s) I.

Please return 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) 245-6995.

Jessica A Fason  
Regulatory Specialist II

Letter Number: 411A00013167

**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: EYMFMS INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
555 WINDERLEY PLACE  
SUITE 300  
MAITLAND FL 32751

Mailing address, if different is:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS.

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: RAYMOND NEIL PRESIDENT  
Address: 555 WINDERLEY PLACE  
SUITE 300  
MAITLAND FL 32751

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

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
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Name and Title: \_\_\_\_\_  
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Name and Title: \_\_\_\_\_  
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\_\_\_\_\_  
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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: RAYMOND NEIL  
Address: 4805 KINGSTON CIRCLE  
KISSIMMEE FL 34746

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: RAYMOND NEIL  
Address: 4805 KINGSTON CIRCLE  
KISSIMMEE FL 34746

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]  
Required Signature/Registered Agent

06 09 2011  
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.

[Signature]  
Required Signature/Incorporator

06 09 2011  
Date