(Red	uestor's Name)	
(Add	lress)	
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(,	
(City	/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Rus	iness Entity Nar	ne)
(Bus)	mess Emily Har	ne,
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	



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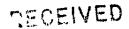
Office Use Only

COVER LETTER

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

SUBJECT: ECA Professional Inc.				
(PROPOSED CORPORA	TE NAME – <u>MUST INCI</u>	LUDE SUFFIX)		
Enclosed are an original and one (1) copy of the artic	cles of incorporation an	d a check for:	_	
\$70.00 . \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status OPY REQUIRED		
FROм: Martha Acero				
Name	(Printed or typed)			
10750 S.W. 66 Street. U	nit. No 314			
A	Address		2(<u> </u>
Doral, Florida 33178	State & Zip		- AON 1102	Vision of
786-326-8905	elephone number	 	PH	19 ABL 20
MCAVEGA@AOL.COM E-mail address: (to be used	for future annual report	notification)	կ։ 50	AND TOTAL STREET

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



11 NOV -1 PM 12: 03



Same of the second September 30, 2011

MARTHA ACERO 10750 SW 66 STREET **UNIT NO. 314** DORAL, FL 33178

SUBJECT: ECA PROFESSIONAL INC.

Ref. Number: W11000047186

We have received your document for ECA PROFESSIONAL INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

Please return the corrected original and one copy of 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) 245-6973.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 211A00022633



RECEIVED 11 SEP 29 PM 1: 16

FLORIDA DEPARTMENT OF STATE IN 1510N OF CORPORATIONS

September 13, 2011

MARTHA ACERO 10750 SW 66 STREET UNIT NO. 314 DORAL, FL 33178

SUBJECT: ECA PROFESSIONAL INC.

Ref. Number: W11000047186

We have received your document for ECA PROFESSIONAL INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

Please return the corrected original and one copy of 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) 245-6973.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 811A00021193

ZILL NOV - L. PM 6: 51

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

The name of the corpo	ECA PROFESSIONAL, IN ration shall be:	NC	JEGNETARY OF JANUARY OF JANUARY OF JANUARY OF GOLD OR	ИС ДП.
107 UNI	RINCIPAL OFFICE Principal street address 50 N.W 66 STREET T.314 RAL, FLORIDA 33178	UNIT 314	2011 NOV - 1 PM 1 s, if different is: REET	4: 5i
	RPOSE h the corporation is organized is: LAWFULL BUSINESS			
ARTICLE IV SI	of stock is: 100			
Name and Title: Address:		Name and Title:Address:		
Name and Title: Address:		Address:		
Name and Title: Address:		Address:		
	EGISTERED AGENT a street address (P.O. Box NOT acceptable) of the MARTHA ACERO 1055 EAST 4 AVENUE HIAL EAH, ELORIDA 33010	ne registered agent is:		
	ICORPORATOR IS of the Incorporator is: ECA PROFESSIONAL INC 10750 N.W 66 STREET, UNIT 314 DORAL, ELORIDA 33178		·	
Having been named this certificate, fame	as registered agent to accept service of process judition with and accept the appointment as regist			n
1/8/13	y wanted		09/06/2011	
I submit this docume document tofthe Dep	Required Signature/Registered Agent nt anti affirm that the facts stated herein are to riment of Sifte constitutes a third degree felony to	rue. I am aware that the false as provided for in s.817.155, F.	Date information submitted in S.	a
_##				
	Required Signature/Incorporator		09/06/2011 Date	