

P11000095347

(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:

Office Use Only

2228-

W11000047186



100211789091

09/12/11--01020--009 **78.75

2011 NOV - 1 PM 4:50

CLERK
SECRETARY OF STATE
DIVISION OF CORPORATE

11/2/11

COVER LETTER

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

SUBJECT: ECA Professional 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: Martha Acero

Name (Printed or typed)

10750 S.W. 66 Street. Unit. No 314

Address

Doral, Florida 33178

City, State & Zip

786-326-8905

Daytime Telephone number

MCAVEGA@AOL.COM

E-mail address: (to be used for future annual report notification)

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2011 NOV - 1 PM 4:50

RECEIVED

11 NOV -1 PM 12:03

DIVISION OF CORPORATIONS



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 30, 2011

RECEIVED

11 OCT 32 AM 11:11

DIVISION OF CORPORATIONS

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

2011 NOV - 1 PM 4:50
CLARETHA GOLDEN
REGULATORY SPECIALIST II
DIVISION OF CORPORATIONS



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
11 SEP 29 PM 1:16
DIVISION 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):

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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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2011 NOV - 1 PM 4:50

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

ARTICLE I NAME ECA PROFESSIONAL, INC
The name of the corporation shall be:

FILED
SECRETARY OF STATE
DIVISION OF CORPORATE

ARTICLE II PRINCIPAL OFFICE

Principal street address
10750 N.W. 66 STREET
UNIT 314
DORAL, FLORIDA 33178

Mailing address, if different is:

2011 NOV - 1 PM 4: 50
10750 N.W. 66 STREET
UNIT 314
DORAL, FLORIDA 33178

ARTICLE III PURPOSE

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

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MARTHA ACERO (PRESIDENT)
Address: 1055 EAST 4 AVENUE
HIALEAH, FLORIDA 33010

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: MARTHA ACERO
Address: 1055 EAST 4 AVENUE
HIALEAH, FLORIDA 33010

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: ECA PROFESSIONAL, INC
Address: 10750 N.W. 66 STREET, UNIT 314
DORAL, FLORIDA 33178

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

09/06/2011

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.



Required Signature/Incorporator

09/06/2011

Date