

P12000030815

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

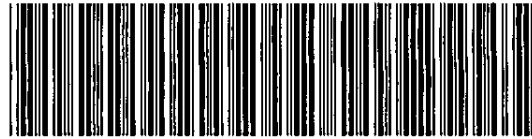
(Document Number)

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

Special Instructions to Filing Officer:

Esperanza Lebron **NAME**  
**AUTHORIZATION BY PHONE TO**  
**CORRECT** Article IV  
**DATE** 3/30/12  
**DOC. EXAM** MRD

Office Use Only



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03/29/12--01018--017 \*\*87.50

**FILED**  
12 MAR 29 PM 3:18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MRD  
3/30/12

## COVER LETTER

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

SUBJECT: E&L Communication Services, 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: Esperanza Roque Lebron

Name (Printed or typed)

133 Tuscany Pointe Ave.

Address

Orlando FL, 32807

City, State & Zip

(321) 247-5142

Daytime Telephone number

roque.esperanza42@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**

**E&L Communication Services, Inc**  
The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
133 Tuscany Pointe Ave.  
Orlando FL, 32807

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
Home based Business - Virtual Service

**ARTICLE IV SHARES**

The number of shares of stock is 1

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

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

**ARTICLE VI REGISTERED AGENT**

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

Name: Esperanza Roque Lebron  
Address: 133 Tuscany Pointe Ave.  
Orlando FL, 32807

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Esperanza Roque Lebron  
Address: 133 Tuscany Pointe Ave.  
Orlando FL, 32807

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

Esperanza Roque Lebron  
Required Signature/Registered Agent

3/22/12  
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.

Esperanza Roque Lebron  
Required Signature/Incorporator

3/22/12  
Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA