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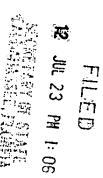
(Requestor's Name)		
(Address)		
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(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

Office Use Only



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COVER LETTER

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

SUBJECT: E.R.L. ENTERPRISES INC.			
(PROPOSED CORPORA	TE NAME – <u>MUST INCLUDE SUFFIX</u>)		
Enclosed are an original and one (1) copy of the artic	cles of incorporation and a check for:		
\$70.00 Filing Fee & Certificate of Status	\$78.75 \$87.50 Filing Fee & Certified Copy Certified Copy & Certificate of Status		
	ADDITIONAL COPY REQUIRED		
FROM: EDWIN RODRIGUEZ LAF	RA (Printed or typed)		
12 CINNAMON DR	ddress		
ORLANDO, FL 32825 City, State & Zip			
321-682-8442	lephone number		
rgbookkeeping@aol.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)

The name of the corp	NAME E.R.L. ENTERPRISES IN poration shall be:	1C.	F.H. E.M
ARTICLE II	PRINCIPAL OFFICE		FILED
	Principal <u>street</u> address CINNAMON DR	PO	Mailing address, if differentis: 1: 06
	RLANDO, FL 32825	QE.	RLANDO FIT32857##T OF STATE
<u>-</u> _	·	-	September of the septem
	URPOSE ich the corporation is organized is: BUSINESS, SALES, IMPORT, EXPO	ORT ETC).
ARTICLE IV S The number of shares			
	NITIAL OFFICERS AND/OR DIRECTORS		
	EDWIN RODRIGUEZ LARA C.E.O.		Title:
Address:	PO BOX 574764 ORLANDO EL 32857	Address:	
	URLANDO EL 32857		
	:	Name and	Title:
Address:		Address:	
	·		
	···	Name and	Title:
Address:		Address:	
	EGISTERED AGENT		
The <u>name and Florid</u> Name:	la street address (P.O. Box NOT acceptable) of the	e registered	l agent is:
Address:	GEORGE C DAHL 12250 MENTA ST. SUITE 105		
riddiess.	ORLANDO, FL 32837		
	VCORPORATOR		
Name:	ss of the Incorporator is:		
Address:	EDWIN RODRIGUEZ LARA		
ridaress.	PO BOX 574764 ORLANDO, FL 32857		
Having been named o this certificate, I am fo	as registered agent to accept service of process formular with and accept the appointment as registe	or the abov ered agent o	e stated corporation at the place designated in and agree to act in this capacity
6	Required Signature/Registered Agent		07/18/2012 Date
J	Required Signature/Registered Agent		Date
			was that the Calor information and missed to
: suomu mis uocume. document to the Dena	nt and affirm that the facts stated herein are tru rtment of State constitutes a third degree felony as	e. 1 am al nrovided :	vare inai ine jaise injormation suomutea in a for in s.817.155. F.S.
			7/16/20
Poplar	· Krok /3		フルムカか