

P12000078088

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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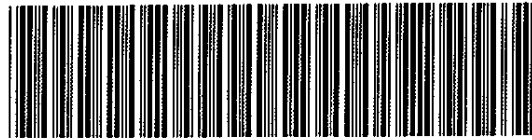
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

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12 SEP 13 PM 4:47

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TALLAHASSEE, FLORIDA  
12 SEP 13 PM 5:19

K 09/13/12

## COVER LETTER

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

SUBJECT: E. Mackery exclusive 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: Eric Brooks  
Name (Printed or typed)

1246 Cherokee Dr.  
Address

Tell. Fla. 32301  
City, State & Zip

(850) 339-1594  
Daytime Telephone number

Brooks eric 88 @ yahoo.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**

The name of the corporation shall be:

E. Zackery Exclusive Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

1246 Cherokee Dr.  
Tall. Fl. 32301

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Leather Craftsmanship / Purses, Duffle Bags, wallets,  
Keychains, etc.

**ARTICLE IV SHARES**

The number of shares of stock is:

100

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

Name and Title:

Judith Harrison (Director)

Address:

5548 Montfield Dr.  
Tall. Fl. 32207

Name and Title:

Address:

Name and Title:

Tanedia DuBose

Address:

5548 Montfield Dr. (Office)  
Tall. Fl. 32207

Name and Title:

Address:

Name and Title:

Eric Brooks Jr.

Address:

1246 Cherokee Dr. (Office)  
Tall. Fl. 32301

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:

Eric Brooks

Address:

1246 Cherokee Dr.  
Tall. Fl. 32301

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name:

Eric Brooks Jr.

Address:

1246 Cherokee Dr.  
Tall. Fl. 32301

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

Eric Brooks Jr.

Required Signature/Registered Agent

9/13/12

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.

[Signature]

Required Signature/Incorporator

9/13/12

Date

DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

SEP 13 PM 5:19

FILED