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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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W12-45985

COVER LETTER

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

SUBJECT: E.C.S. EAST COAST 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: MARK BARKETT

Name (Printed or typed)

820 CLARK ROAD

Address

LAKELAND, FLORIDA, 33815

City, State & Zip

404-565-6305

Daytime Telephone number

MARK@EC SOFATLANTA.COM ✓

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

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

ORIGINAL DOCUMENT # W12000045985

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TALLAHASSEE, FLORIDA

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.C.S. EAST COAST INC.**

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address
820 CLARK ROAD
LAKE LAND, FLORIDA
33815

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
NEW BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: **10,000**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MARK BARKETT CEO	Name and Title: _____
Address: 820 CLARK ROAD	Address: _____
LAKE LAND, FLORIDA	_____
33815	_____
 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: **MARK BARKETT**
Address: **820 CLARK ROAD**
LAKE LAND, FLORIDA, 33815

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: **MARK BARKETT**
Address: **820 CLARK ROAD**
LAKE LAND, FLORIDA, 33815

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

9-7-12

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.



Required Signature/Incorporator

9-7-12

Date

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TALLAHASSEE, FLORIDA