

PI20000081370

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

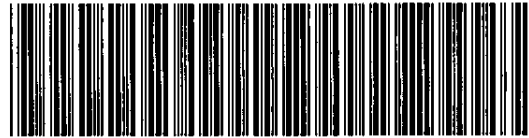
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



700239147197

09/04/12--01012--005 \*\*78.75

12 SEP 26 AM 7:53

9/6

8

w12-46133

## COVER LETTER

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

SUBJECT: **iEFFECT CORPORATION**

(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: **Deborah Isaiah**

Name (Printed or typed)

**18148 Cadence Street**

Address

**Orlando FL 32820**

City, State & Zip

**407-536-6832**

Daytime Telephone number

**deborah.isaiah@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** EFFECT CORPORATION

The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
18148 Cadence St  
Orlando FL 32820

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
All Lawful Business

**ARTICLE IV SHARES**

The number of shares of stock is 500

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

Name and Title: Deborah Isaiah, President  
Address: 18148 Cadence Street  
Orlando FL 32820

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: Deborah Isaiah  
Address: 18148 Cadence Street  
Orlando FL 32820

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Deborah Isaiah  
Address: 18148 Cadence Street  
Orlando FL 32820

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

Deborah Isaiah

Required Signature/Registered Agent

9/20/2012

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.

Deborah Isaiah

Required Signature/Incorporator

9/20/2012

Date

12 SEP 24 AM 7:53