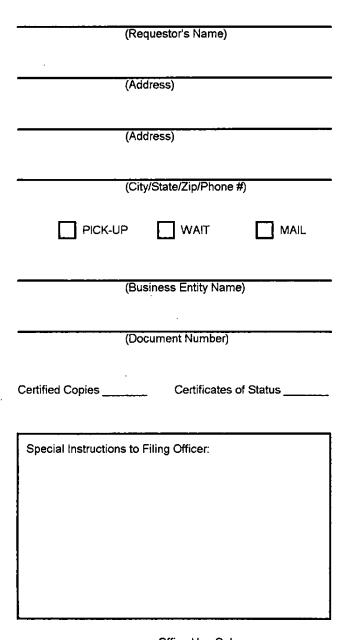
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FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

1/4

## **COVER LETTER**

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

SUBJECT:	NORTHEASTER						
	(PROPOSED CORPO	ORATE NAME – <u>MUST INCL</u> I	JDE SUFFIX)				
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:							
\$70.00 Filing Fee	\$78.75 e Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	& Certificate of Status				
FROM: LOUIS A. COLINS  Name (Printed or typed)							
	2313 1314	AVE W					
-	Address						
BRADENTON, FL 34205							
City, State & Zip							

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

NORTH EASTERN SERVICES Ø8309mail. COM E-mail address: (to be used for future annual report notification)

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME The name of the corporation	on shall be: NORT	HEASTERN S	SERVICES, ]	INC.
ARTICLE II PRIN	CIPAL OFFICE rincipal street address		Mailing address, if differen	
ARTICLE III PURPO The purpose for which the	OSE corporation is organized is:	FOR PROFIT	t-FINANCIAL	Education
Name and Title:		RESIDENTName and Tit	le:	SECRETARY OF STATE DIVISION OF CORPORATION'S  2013 CCT 23 PM 1: 10
		Address:	le:	
		Name and Tit	le:	

· · · · · · · · · · · · · · · · · · ·		SECRETARY OF STATE DIVISION OF CORPORATION				
Name and Title:	Name and Title:	2013 ACT 10				
Address	Address	2013 OCT 23 PM 1: 10				
Address	Address	<del></del>				
ARTICLE VI REGISTERED AGENT						
The name and Florida street address (P.O. Box NOT ac	cceptable) of the registered agent	: is:				
Name: LOUIS COLLINS						
Address: 2313 13TH AVE W						
BRADENTON FL 30	1205					
OKADENION IL O	1200					
ARTICLE VII INCORPORATOR						
The name and address of the Incorporator is:						
Name: LOUIS COLLINS						
77171711 11	101					
Address: 23/3/3/AVE	71500					
GRADENTON FL	342 ps					
Having been named as registered agent to accept service	e of process for the above state.	d cornoration at the place designated in				
this certificate, I am familiar with and accept the appoint	ment as registered agent and a	gree to act in this capacity				
Louis Callins		10-20-13				
Required Signature/Registered	Agent	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.						
document to the Department of State Constitutes & Hara a	ogree jewiy us provincu jor m	h halb				
Required Signature/Incorpor	ator	10-20-13 Date				
- isodanoa signama montos						