

COVER LETTER

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

SUBJECT: Eischeid 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Caroline Eischeid
Name (Printed or typed)

2119 Fitch Ave
Address

Alva, FL 33920
City, State & Zip

239-450-6778
Daytime Telephone number

Carolinecaykardallo@gmail.com
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 26, 2014

CAROLINE EISCHEID
2119 FITCH AVE
ALVA, FL 33920

SUBJECT: EISCHEID CORPORATION
Ref. Number: W14000052239

We have received your document for EISCHEID CORPORATION and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The only acceptable words for designation as a professional association are PROFESSIONAL ASSOCIATION, P.A., and CHARTERED.

The specific business purpose of the professional association must be stated in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Carol Mustain
Regulatory Specialist II

Letter Number: 814A00018318

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: Eischeid Corporation

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2119 Fitch Ave
Alva, FL 33920

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ~~to provide professional~~
~~corporation~~ Ang and all lawful
business

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 SEP - 8 PM 4:10

ARTICLE IV SHARES

The number of shares of stock is: 4

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Caroline Eischeid Name and Title: _____
Address: President Address: _____
2119 Fitch Ave
Alva, FL 33920

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

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: Caroline Eischeid
Address: 2119 Fitch Ave
Alva, FL 33920

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Caroline Eischeid
Address: 2119 Fitch Ave
Alva, FL 33920

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

8/18/14
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

8/18/14
Date