

P15000050217

(Requestor's Name)

(Address)

(Address)

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(Business Entity Name)

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15 JUN -8 PM 3:05
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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AND
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1/1

COVER LETTER

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

SUBJECT: Elite Media Pros, 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: Nicholas Defelici
Name (Printed or typed)

6444 Sw 52 Ter.
Address

Palm City FL 34990
City, State & Zip

772 925 9366
Daytime Telephone number

info@Elitemediapros.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: Elite Media Pros, INC

ARTICLE II PRINCIPAL OFFICE

6444 Sw 52 Ter Principal ~~street~~ address

Mailing address, if different is:

Palm City FL,
34990

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Data Collection and
other Photography Services.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Nicholas Defelici Name and Title: Nicholas Defelici

Address: President Address: Secretary
6444 Sw 52 Ter 6444 Sw 52 Ter
Palm City FL, 34990 Palm City FL, 34990

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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TALLAHASSEE, FLORIDA

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AND
FILED

15 JUN -8 PM 3:05

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Nicholas Defelici
Address: 6444 SW 52 Ter
Palm City FL, 34990

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Nicholas Defelici
Address: 6444 SW 52 Ter
Palm City FL, 34990


ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)


Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

6-5-15
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

6-5-15
Date