

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H15000208257 3)))



H150002082573ABC/

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations  
Fax Number : (850)617-6381

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850)205-8842  
Fax Number : (850)878-5368

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

FLORIDA PROFIT/NON PROFIT CORPORATION  
Economy Window Blinds Inc

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

RECEIVED  
15 AUG 28 PM 1:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

AUG 3 1 2015

S. GILBERT

Electronic Filing Menu

Corporate Filing Menu

Help

## COVER LETTER

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

**SUBJECT:** ECONOMY WINDOW BLINDS 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      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status  
**ADDITIONAL COPY REQUIRED**

**FROM:** CT Corporation System  
Name (Printed or typed)  
1200 South Pine Island Road  
Address  
Plantation, FL 33324.  
City, State & Zip  
518-451-8052  
Daytime Telephone number  
CT-statecommunications@wolterskluwer.com  
E-mail address: (to be used for future annual report notification)

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

FILED

15 AUG 28 PM 12:26

**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: ECONOMY WINDOW BLINDS INC

**ARTICLE II PRINCIPAL OFFICE**  
Principal street address

Mailing address, if different is:

701 Market St suite 111

St Augustine Fl 32995

**ARTICLE III PURPOSE**  
The purpose for which the corporation is organized is: Installation of Window Blinds

**ARTICLE IV SHARES**  
The number of shares of stock is: 100

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

Name and Title: Charles RANDY LANCE

Name and Title: President

Address: 2085 A1A S Ste 203

Address:

Saint Augustine, FL 32080-6506

Name and Title:

Name and Title:

Address:

Address:

Name and Title:

Name and Title:

Address:

Address:

8/28/2015 1:05:24 PM From: To: 8506176381( 4/4 )

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: C T Corporation System  
Address: 1200 South Pine Island Road  
Plantation, FL 33324.

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Charles RANDY LANCE  
Address: 2085 A1A S Ste 203  
Saint Augustine, FL 32080-6506

**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

By: Jeffrey L. Vance C T Corporation System Vice President & Assistant Secretary  
Required Signature/Registered Agent 8/19/15  
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 2.817.155, F.S.

Charles Randy Lance  
Required Signature/Incorporator 8/19/15  
Date