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(Requestor's Name)

(Address)

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(Business Entity Name)

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NOV 19 2015

S. GILBERT

FILED
15 NOV -9 PM 3:34
SEAL OF THE STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: EFS Construction 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 ☐ \$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: Eugene F. Santoro

Name (Printed or typed)

12200 Riverbend Court

Address

Port St. Lucie, Florida 34984

City, State & Zip

(772) 370-1967

Daytime Telephone number

flochief@att.net

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)

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ARTICLE I NAME

The name of the corporation shall be: EFS Construction Corporation

ARTICLE II PRINCIPAL OFFICE

Principal street address

12200 Riverbend Court

Port St. Lucie, Florida 34984

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Starting a New Business

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Eugene F. Santoro, President, Treasurer

Address: 12200 Riverbend Court

Port St. Lucie, Florida 34984

Name and Title: Mary A. Santoro, Secretary

Address: 12200 Riverbend Court

Port St. Lucie, Florida 34984

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

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: Eugene F. Santoro _____

Address: 12200 Riverbend Court _____

Port St. Lucie, Florida 34984 _____

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Eugene F. Santoro _____

Address: 12200 Riverbend Court _____

Port St. Lucie, Florida 34984 _____

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

Eugene F. Santoro

Required Signature/Registered Agent

11/04/2015

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.

Eugene F. Santoro

Required Signature/Incorporator

11/04/2015

Date