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S. PRATHER

COVER LETTER

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

SUBJECT: A POSTAL CENTER USA, 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: CHRIS P. ECON

Name (Printed or typed)

2357-3 S. TAMIAMI TRL

Address

VENICE, FL. 34293

City, State & Zip

941-492-5762

Daytime Telephone number

ABCECON@VERIZON.NET

E-mail address: (to be used for future annual report notification)

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

1/14/2016

Department of State

New Filing Section

Division of Corporations

P. O. Box 6327

Tallahassee, FL 32314

TO WHOM IT MAY CONCERN:

I AM NOT PLANNING ON REVOKING THE DISSOLUTION FOR A POSTAL CENTER USA, INC. I AM
RELEASING THE NAME TO THE NEW CORPORATION.

SINCERELY,



CHRIS P. ECON

PRESIDENT/OWNER

A POSTAL CENTER USA, INC.

941-492-5762

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: A POSTAL CENTER USA, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

2357-3 S. TAMiami TRL

VENICE, FL. 34293

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TO SELL USPS, FED-EX, AND UPS PRODUCTS AND SERVICES

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: CHRIS P. ECON/PRESIDENT

Address 5112 SUNNYDALE CIR N

SARASOTA, FL. 34233

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

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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: GERALD F. BISHOP

Address: 2831 RINGLING BLVD, STE 218F

SARASOTA, FL. 34237

ARTICLE VII INCORPORATOR

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

Name: CHRIS P. ECON

Address: 5112 SUNNYDALE CIR N

SARASOTA, FL. 34233

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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

1/14/2016
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

1/14/2016
Date