

P16000025.701

(Requestor's Name)

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PICK-UP  WAIT  MAIL

(Business Entity Name)

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*W6-3827*

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

16 MAR 18 PM 4: 50

FILED

*03-28-16*

**COVER LETTER**

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

SUBJECT: EGLEA'S SUNCOAST ENTERPRISE, 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

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

FROM: EGLE VENCKUS  
Name (Printed or typed)  
1815 NE 6th St.  
Address  
Cape Coral, FL 33909  
City, State & Zip  
408-557-5830  
Daytime Telephone number  
eglevencus@yahoo.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

January 20, 2016

EGLE VENCKUS  
1815 NE 6TH STREET  
CAPE CORAL, FL 33909

SUBJECT: A LIT ENTERPRISES, INC  
Ref. Number: W16000003827

We have received your document for A LIT ENTERPRISES, INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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.

Tim Burch  
Regulatory Specialist II

Letter Number: 116A00001259

RECEIVED  
CORPORATIONS  
JAN 20 2016  
16 FEB -8 09:11:05  
CORPORATIONS



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 9, 2016

EGLE VENCKUS  
1815 NE 6TH STREET  
CAPE CORAL, FL 33909

SUBJECT: A SUNCOAST ENTERPRISE, INC.  
Ref. Number: W16000003827

We have received your document for A SUNCOAST ENTERPRISE, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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.

Tim Burch  
Regulatory Specialist II

Letter Number: 416A00002789

16 MAR 18 AM 11: 18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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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: EGLEA'S SUNCOAST ENTERPRISE, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address: 1815 NE 6th St, Cape Coral, FL 33909

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any and all lawful business.

ARTICLE IV SHARES

The number of shares of stock is: 7500

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ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: EGLE VENCUS (P) Name and Title: GINTARAS VENCUS (V)
Address: 1815 NE 6th St, Cape Coral, FL 33909 Address: 1815 NE 6th St, Cape Coral, FL 33909

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: EGLE VENCKUS  
Address: 1815 NE 6th St.  
Cape Coral, FL 33909

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16 MAR 18 PM 4:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE VII INCORPORATOR**

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

Name: EGLE VENCKUS  
Address: 1815 NE 6th St.  
Cape Coral, FL 33909

**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

3.14.16

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

3.14.16

Date