

P16000067851

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*[Handwritten signature]*



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 22, 2016

ELENA TRUMPER  
1625 SE 46TH STREET, STE. 5A  
CAPE CORAL, FL 33904

SUBJECT: EUROPEAN IMPORTS OF SWFL, INC.  
Ref. Number: W16000051230

We have received your document for EUROPEAN IMPORTS OF SWFL, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Articles of Incorporation are required to be filed with this office in order for the name registration to be filed. Inclosed is the proper forms that you will need to fill out and resubmit to this office.

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.

Matthew T Moon  
Regulatory Specialist II

Letter Number: 216A00015410

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TALLAHASSEE, FLORIDA  
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**COVER LETTER**

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

**SUBJECT:** \_\_\_\_\_  
(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:** Elena Trumpel  
Name (Printed or typed)

1625 SE 46th Street Ste. 3A  
Address

Cape Coral FL 33904  
City, State & Zip

239-265-8259  
Daytime Telephone number

trumpel77@yahoo.com  
E-mail address (to be used for future annual report notification)

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

RECEIVED

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TALLAHASSEE, FLORIDA

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: European Imports of SW FL, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1625 SE 46th Street Ste. 5A  
Cape Coral FL 33904

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

for profit

16 AUG -3 PM 4:28

SECRET  
STATE  
CORPORATION

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Elena Trumper Name and Title: \_\_\_\_\_

Address: 1625 SE 46th Street Address: \_\_\_\_\_  
Ste. 5A  
Cape Coral FL 33904

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:

Elena Trumper

Address:

1625 SE 46th Street Ste. 5A

Cape Coral FL 33904

16 AUG -3 PM 4:28

REC'D  
STATE  
CLERK

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name:

Elena Trumper

Address:

1625 SE 46th Street Ste. 5A

Cape Coral FL 33904

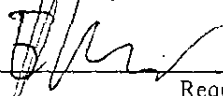
**ARTICLE VIII EFFECTIVE DATE:**

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*

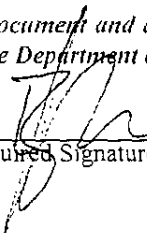


Required Signature/Registered Agent

8/01/16

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

8/01/16

Date