P16000076097

(Re	questor's Name)			
(Address)				
(Address)				
(Cit	y/State/Zip/Phone #)		
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates o	f Status		
Special Instructions to Filing Officer:				

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08/24/16--01013--024 **70.00

SECRETARY OF STATE

COVER LETTER

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

SUBJECT: Electropic Less (PROPOSED CORPORAT	sing, INC			
(PROPOSED CORPORATE NAME ∠ MUST INCLUDE SUFFIX)				
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:				
\$\frac{1}{2}\$\$ \$70.00 \text{\$\text{\$\text{\$\text{\$}}}\$} \$\$ \$78.75\$ Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	& Certificate of Status		
FROM: Paul Lucas Name (Printed or typed) 18495 S- Dixie Hwy Suite 391 Address				
Miami, Fl 33157 City, State & Zip				
Daytime Telephone number				

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 30, 2016

PAUL LUCAS 18495 S DIXIE HWY SUITE 395 MIAMI, FL 33157

SUBJECT: ELECTRONIC LEASING, INC.

Ref. Number: W16000060024

SECRETARY OF STARR

We have received your document for ELECTRONIC LEASING, 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):

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

You must list at least one incorporator with a complete business street address.

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

Please list the complete principal office address.

In order for usto process your document, the Director's address has to be filled out.

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.

Nadira D McClees-Sams Regulatory Specialist II

Letter Number: 316A00018478

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE 1 NAME The name of the corpora	tion shall be: Electro	ovic Lessing -	ر د د
ARTICLE II PRINC	EIPAL OFFICE Principal <u>street</u> address	Mailing	address, if different is:
	likie Huy suite	388	
miami. F	33157		
ARTICLE III PURPO The purpose for which the	one corporation is organized is:	To conduct	200inau 2
			2016 SEC
ARTICLE IV SHAR The number of shares of	ES stock is: /OO		AUG 24 RETARY (AHASSEE
	AL OFFICERS AND/OR DIRECT		AH 8:
Name and Titl	e: Paul Lucas (Pa	Name and Title:	3 5
Address	7500 SW 171 St Polmetto Bry Fl :	Address:	
Name and Title):	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 accept	table) of the registered agent is:
	word) of the foguiered agent is:
Name: (Paul Lucar	22
Address: 7500 SW 171 Str	
Polnetto By Pl 3311	2016 AUG 24 SECRETARY TALLAHASS
ARTICLE VII INCORPORATOR	SHELF AM
The name and address of the Incorporator is:	ြို့ ထ
Name: Paul Lucas	5 S
Name: Proces Lucas Address: 2500 Sou 17 1 St	
Black By F1 33	3157
ARTICLE VIII EFFECTIVE DATE:	
Effective date, if other than the date of filing:	d cannot be more than five business days prior or 90 business
Note: If the date inserted in this block does not meet the app the document's effective date on the Department of State's a	plicable statutory filing requirements, this date will not be listed as ecords.
Having been named as registered agent to accept service of this certificate, ham familiar with and accept the appointme	f process for the above stated corporation at the place designated in the as registered agent and agree to act in this cupacity
X-12/1 PAUL	nucas 8 19.16
Required Signature/Registered Ag	
I submit this document and affirm that the facts stated her document to the Department of State constitutes a third degr	rein are true. I am aware that the false information submitted in ree felony as provided for in s.817.155, F.S.
X / Day LUCA	s 8 19-16
Required Signature/Incorporator	Date -