

P20000043387

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

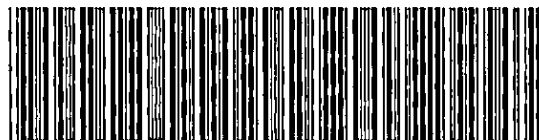
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2020 JUN 11 AM 10:23  
CLERK OF THE COURT  
TALLAHASSEE, FL



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 27, 2020

ERIN KAY SOLOGASTGA  
1616 KUHLLACRE DR  
TALLAHASSEE, FL 32308

SUBJECT: ~~EKS CONSULTING, INC.~~  
Ref. Number: W20000051796

*— change to EKS. SOLO  
CONSULTING, INC*

We have received your document for EKS CONSULTING, INC. and your check(s) totaling \$87.50. 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 administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation.

One or more major words may be added to make the name distinguishable.

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.

Keyna E Page  
Regulatory Specialist II

Letter Number: 720A00010548

## COVER LETTER

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

change to EKSOLO CONSULTING,  
INC.  
SUBJECT: ~~EKS CONSULTING, 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

☐ \$78.75  
Filing Fee  
& Certified Copy

☒ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

FROM: ERIN KAY SAOGAISTOA  
Name (Printed or typed)

1616 Kuhlacoe Dr.  
Address

TALLAHASSEE, FL 32308  
City, State & Zip

850 579-1190  
Daytime Telephone number

~~ESOGAISTOA@outlook.com~~  
E-mail address: (to be used for future annual report notification)

EKSOLO@EKSCONSULTING.ORG

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

CHANGE

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: ERSO CONSULTING, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1616 Kuhlacker Dr.  
TALLAHASSEE, FL 32308

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: PROVIDE CONSULTING SERVICES

FOCUSED ON CORPORATE GOVERNANCE, STRATEGIC  
PLANNING AND PROFESSIONAL DEVELOPMENT

ARTICLE IV SHARES

The number of shares of stock is: 500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ERIN SOLOGASTO, CEO Name and Title: \_\_\_\_\_

Address: 1616 Kuhlacker Dr. Address: \_\_\_\_\_

TALLAHASSEE, FL 32308

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

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2020 JUN 11 AM 10:23  
TALLAHASSEE, FL

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: ERIN SOLOGAISTOVA

Address: 1616 Kuhlacree Dr.  
TALLAHASSEE, FL 32308

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: ERIN SOLOGAISTOVA

Address: 1616 Kuhlacree Dr.  
TALLAHASSEE, FL 32308

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SECRETARY OF STATE  
TALLAHASSEE, FL

**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 days prior or 90 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*

Erin Sologaitova

Required Signature/Registered Agent

5/15/20

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.*

Erin Sologaitova

Required Signature/Incorporator

5/15/20

Date