# P950004-2926 TRANSMITTAL LETTER

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

SUBJECT: \_\_\_\_

5000001495715 -05/22/35--01065--012 \*\*\*\*122.50

	origina	l and one (1) co	py of the articles of incorporati	on a교육ch <b>oc</b> k
for :	0.00	\$78.75	\$122.50 \$131.2	
Filing		Filing Fee & Certificate	Filing Fee Filing Fee & Certified Copy Certified Co & Certifica Additional Copy Required	NEW 2
192				: 35 A1E )RIDE
, FL 34492	iOM:	Kon Name (	Le Sage printed or typed	<del></del>
1000 -1ELD, 348		3075		ROAD
. Z. INC. .O. BOX UMMERF 04-347-86		Summer		9/ W95-10857
шгов		,	y, State & Zip	195-10
			347- 8648 Telephone number	- W
				0/2
		500	2_	W 6/2

(Proposed corporate name - mur, include suffix)

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



# FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

May 24, 1995

RON LESAGE 3075 SE 156 PLACE ROAD SUMMERFIELD, FL 34491

SUBJECT: E Z, INC.

Ref. Number: W95000010857



We have received your document for E Z, INC. and your check(s) totaling \$122.50. 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 existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

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 filling of your document, please call (904) 487-6923.

Letter Number: 195A00026341

Doris McDuffie Corporate Specialist Supervisor

### ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

The name of the corporation shall be:

PLEASE NOTE THAT ZINC IS MY PRODUCT THERE FORE EZING THE ZING IS AN ACTUAL PART OF THE TITLE

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

#### ARTICLE III **SHARES**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1,000 (one Thousand)

INITIAL REGISTERED AGENT AND STREET ADDRESS ARTICLE IV The name and address of the initial registered agent is:

> RON Lesage 3075 SE 156 place Road Summer field, FL 34491

## ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

RON Le SAge 3075 SE 156 place Rd. Summer field, FL 34491

Pamela C. Le Sage 3075 SE 156 place Rd. Summer Reld, FL 34491

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:	EZ, INC. EZ	INC, INC.
<u>3075</u>	Experience is:  Le Sage (NAME)  SE 156 place Rd.  Box or Mail Drop Box NOT ACCEPTION  (CITY/STATE/ZIP)	95 JUN -2 PH 1: 35 SECRETARY OF STATE TALLAHASSEE, FLORIDA

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Ran Le Sage 5/11/95 (DATE)