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COVER LETTER

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

SUBJECT: The	Electric C	aroup Inc.			
	(PROPOSEĎ COŘPÔ	RATE NAME – <u>Must in</u>	CLUDE SUFFIX)		
Enclosed is an original a \$70.00 Filing Fee	nd one (1) copy of the Artic \$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate		
		ADDITIONAL CO	OPY REQUIRED		
FROM: <u>Jeonsfer Beroid</u> Name (Printed or typed)					
7671 Knoll Dr. N. Address					
•	Jacksny.lle, F	3221	_		

380-388-4860 Daytime Telephone number

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

theolectric around committee annual report dotification)

 $\begin{array}{c} \textbf{ARTICLES OF INCORPORATION} \\ \textbf{, fn compliance with Chapter 617, F.S., (Not for Profit)} \end{array}$

ARTICLE I NAME The name of the corporation shall be: The Figure 1. The	ectric (group Inc.
ARTICLE II PRINCIPAL OFFICE		•
Principal street address:		Mailing address, if different is:
JUZI Knoll dr. N.		
Jacksonville FL 3220	<u>ul</u>	
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	ud Corpa	oxation is organized exclusively
For charitable, religious, educat	rional, and	d scientific purposes including,
For such purposes, the making of	o distribu	trons to organizations that qualify
		1(C)(3) of the Internal Revenue Code
or the corresponding section	of any fi	ture federal tax code. The
•		become productive members of
society.		•
ARTICLE IV MANNER OF ELECTION The manner	in which the dire	ctors are elected and appointed: A provi ded
For in the WIAWS		
ARTICLE V INITIAL OFFICERS AND/OR DIRECTO	29(
Beni	αλ	_
Name and Title: President, Jennife Ban	arme and Title	: Vice Resident, Albert Benoit
Address 10-71 Knoll Dr. W	Address:	7671 Knoll Dr. N.
Jacksonville Fl. 3002	١.	Jacksonville Fl. 32001
Name and Title Secretory, Heretha Bell	Name and Title	Treasurer, Albert Beroit
Address 500 Willaw Rd	Address:	JUTI Knoll Dr. N.
Middleburg Fl. 30068		Sockson: lle, Fl. 30001
Name and Title:	Name and Title	SECOND TO THE SECOND T
Address	Address:	12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	•	

Name and Title:		Name and Title:	
Address		Address:	
Name and Title:		Name and Title:	
Address		Address:	
			
 			
	IISTERED AGENT a street address (P.O. Box NOT accep	ntable) of the registered execution	
_	Jennifer Beroid	بيبة	4 5
Address:	DETIKNOU DO N.		
	achsanville F1, 3	3aaa	
ADTICLE VII INC	CORDOR ATOR		AN BIOS
ARTICLE VII INC. The name and address	ss of the Incorporator is:		8: 03
	Jennifer Benoit		
	7671 Knoll Dr. N.		
	socksonille Fl. 32		
ARTICLE VIII EFI	FECTIVE DATE:		
Effective date, if other	than the date of filing: (0-1)-jL	(OPTIONAL) d cannot be more than five business days prior or	00 business days
after the filing.)	s listed, the date must be specific and	in cannot be more than live business days prior or	90 business days
		pplicable statutory filing requirements, this date will no	ot be listed as the
document's effective	date on the Department of State's reco	ords.	
		of process for the above stated corporation at the pl	ace designated in this
•		s registered agent and agree to act in this capacity	
Jenn	Required Signature of Registered	(o-16	-16 ate
O	Required Signature of Registered	Agent Da	ite
	nt and affirm that the facts stated here. State constitutes a third degree felony (rin are true. I am aware that any false information su as provided for in s.817.155, F.S.	bmitted in a document
1	\sim \rightarrow		-1/ 0
- Jens.	Required Signature of Incorp	porator	Pate