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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

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: (850)617-6381

From:

Account Name

: KRISJOENNA SERVICES, INC.

Account Number : 120080000033

Phone : (305) 644-3055

Fax Number

: (305) 644-3052

Enter the email address for this business entity to be used for future annual report mailings. Enter only one amail address please.

FLORIDA PROFIT/NON PROFIT CORPORATION

A.S.A ELECTRICAL, CORP

Certificate of Status	0
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Page Count	01
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COVER LETTER

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 RIVISION OF CORFORATIONS
16 MAR 24 AM 9: 17

SUBJECT: A.S.A ELECTRICAL CORP

(PROPOSED CORPORATE NAME - MUST INCLUDE SUITIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$\begin{align*} \precept{\sigma} \precept{\sigma}

mar.	SAMUEL ALFARO		
FROM:	Name (Printed or typed)		
	22721 SW 88 PL # 8		
	Address		
	CUTLER BAY, FL 33190		
	City, State & Zip		
روم.	7045266814		
)	Daytime Telephone number		
	KJESERVICES@YAHOO.COM		
	E-mail address: (to be used for future annual report notification)		

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

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

LE II PRI	VCIPAL OFFICE Principal street address	Mailing address, if different
SW 88 PL UN	TT 8	
ER BAY, FL	3190	
CLE III PUR urpose for whic	POSE h the corporation is organized is:	URPOSE
CLE IV SHA	tRES 100 of stock is:	· · · · · · · · · · · · · · · · · · ·
imber of shares CLE V INT	of stock is:	· ·
imber of shares CLE V INT	of stock is: TAL OFFICERS AND/OR DIRECTORS ide: SAMUEL ALFARO PRESIDENT	Name and Title:
imber of shares CLE V INT	of stock is: TAL OFFICERS AND/OR DIRECTORS ide: SAMUEL ALFARO PRESIDENT 22721 SW 88 PL # 8	Neme and Title:Address:
ember of shares CLE V INT Name and T	of stock is: TAL OFFICERS AND/OR DIRECTORS ide: SAMUEL ALFARO PRESIDENT	4.11
CLE V INT Name and T Address	of stock is: TAL OFFICERS AND/OR DIRECTORS ide: SAMUEL ALFARO PRESIDENT 22721 SW 88 PL # 8 CUTLER BAY, FL 33190	Address:
CLE V INT Name and T Address Name and Ti	of stock is: TAL OFFICERS AND/OR DIRECTORS SAMUEL ALFARO PRESIDENT 22721 SW 88 PL # 8 CUTLER BAY, FL 33190 CHE: PRISCILA SAMPAYO	4.11
CLE V INT Name and T Address	of stock is: TAL OFFICERS AND/OR DIRECTORS SAMUEL ALFARO PRESIDENT 22721 SW 88 PL # 8 CUTLER BAY, FL 33190 CHE: PRISCILA SAMPAYO VICE PRESIDENT	Address:
CLE V INT Name and T Address Name and Ti	of stock is: TAL OFFICERS AND/OR DIRECTORS SAMUEL ALFARO PRESIDENT 22721 SW 88 PL # 8 CUTLER BAY, FL 33190 CITCLE PRESIDENT 13931 SW 171 ST	
CLE V INT Name and T Address Name and Ti	of stock is: TAL OFFICERS AND/OR DIRECTORS SAMUEL ALFARO PRESIDENT 22721 SW 88 PL # 8 CUTLER BAY, FL 33190 CHE: PRISCILA SAMPAYO VICE PRESIDENT	
Name and Ti Address Name and Ti Address	of stock is: TAL OFFICERS AND/OR DIRECTORS Ide: SAMUEL ALFARO PRESIDENT 22721 SW 88 PL # 8 CUTLER BAY, FL 33190 VICE PRESIDENT 13931 SW 171 ST MIAMI, FL 33177	

Name and Title:		Name and Title:		
Addres	8	Address:		
ARTICLE VI	REGISTERED AGENT			
The <u>name and I</u>	Torida street address (P.O. Box NOT acceptable	e) of the registered agent is:		
Name:	SAMUEL ALFARO			
Address:	22721 SW 88 PL # 8	<u> </u>	\$60 16 P	
	CUTLER BAY, FL 33190		FIL GURETAN SIBN DE S MAR 24	
ARTICLE VII	INCORPORATOR		3	
The name and a	ddress of the Incorporator is:		9 7	
Name:	SAMUEL ALFARO		1) long	
Address:	22771 SW 88 PL # 8			
	CUTLER BAY, FL 33190		•	
Effective date, if (If an effective days after the fine) Note: If the date	EFFECTIVE DATE: f other than the date of filing: date is listed, the date must be specific and calling.) e inserted in this block does not meet the applicate of the date on the Department of State's reconstruction.	able statutory filing requirements, t		
this cartificate, I	med as registered agent to accept service of pro am familiar with and accept the appointment a	cess for the above stated corporate registered agent and agree to act	in this capacity	
Samuel Alfano - Required Signature/Registered Agent			03/23/2016	
.			Date	
I submit this document to the	cument and affirm that the facts stated herein Department of State constitutes a third degree f \(\lambda \) \(\lambda \)	are true. I am aware that the fuls clony as provided for in s.817.155,	F.S.	
Requ	ired Signature/Incorporator	· ·	03/23/2016	