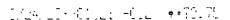
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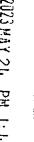
(Requ	estor's Name)	
(Addre	ess)	
(**************************************	· · · · /	
(Addre	ess)	
(City/S	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
<u> </u>		
(Busin	ness Entity Nar	ne)
(Docu	ment Number)	
Certified Copies	Certificates	s of Status
Certified Copies	O O T T T T T T T T T T T T T T T T T T	
Special Instructions to Fil	ing Officer:	
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Office Use Only



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COVER LETTER

_	stration Section sion of Corporat	ions			
SUBJECT:	AAA IN CTD EG	ΓELECTRIC, INC.			
SUBJECT.	·	Name of corporat	ion - m	ust include suffix	
Dear Sir or N	Aadam:				
"Certificate of	of Existence," or	y Foreign Corporation "Certificate of Good S poration to transact bus	tanding	" and check are subm	Business in Florida." litted to register the
Please return	all corresponde	nce concerning this ma	tter to t	he following:	
KEVIN AND	DENISE MILLE	R			
		Name	of Pers	on	,
MAIN STRE	ET ELECTRIC, I	NC.			
		Firm/C	Compan	y	
519 E MAIN	STREET				
		Ac	idress		, <u>.</u>
MARION, M	11CHIGAN 49665	į			
		City/Sta	e and Z	ip code	<u> </u>
MSE.INC519	@YAHOO.COM				
	E	mail address: (to be us	ed for f	uture annual report no	tification)
For further in	nformation conc	erning this matter, plea	se call:		
DENISE M	MILLER	at (231))	743-6423 Daytime Telepho	
Nan	ne of Person	Area C	Lode , -	Daytime Telepho	one Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street. Suite 810 Tallahassee, FL 32303		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			
Enclosed is a Please make o □ \$70.00 Fi	heck payable to:	ollowing amount: FLORIDA DEPARTME \$78.75 Filing Fee & Certificate of Status	□ \$7	STATE 8.75 Filing Fee & ertified Copy	□ \$87.50 Filing Fee. Certificate of Status & Certified Copy

BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES. THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

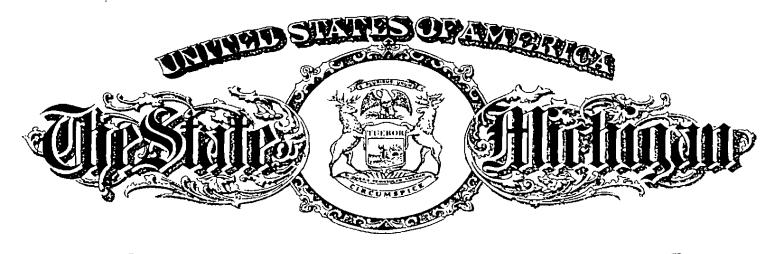
	ELECTRIC, INC.			
(Enter name of co	orporation; must include "INCORPORATED," orp," "Inc," "Co," or "Corp.")	·COMPANY," "CORPORATIO!	1 ,"	
(If name unavaila	ible in Florida, enter alternate corporate name ad-	opted for the purpose of transacting	ng business in Florida)	
MICHIGAN		3. 38-3626331		
2. (State or country	y under the law of which it is incorporated)	(FEI number, if applicable)		
4. (Date	of incorporation)	(Date of duration, if other than perpetual)		
6				
·	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502)	lorida, if prior to registration) 2, F.S., to determine penalty liabil	ity)	
₇ 519 E MAIN STE	REET, MARION, MICHIGAN 49665			
/·	(Principal office	street address)		
	(Current mailing	address, if different)	·	
	(current manning)	,	20	
8. Name and stree	et address of Florida registered agent: (P.O.	Box NOT acceptable)	23 HA	
Name:	DENISE M MILLER	·	2023 MAY 24 PM 1: 43	
Office Address:	6368 W GRANT STREET		P :	
	HOMOSASSA	, Florida 34448		
	(City)	(Zip code)	υ τ	
designated in this further agree to c	ent's acceptance: ned as registered agent and to accept service application, I hereby accept the appointme omply with the provisions of all statutes rele with and accept the obligations of my posice	nt as registered agent and agr ative to the proper and comple	ree to act in this capacity.	
_	Lenis Mil		<u></u>	
	(Registered agent's sign			
10. Attached is a	certificate of existence duly authenticated, n	ot more than 90 days prior to c	felivery of this application	

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

under the law of which it is incorporated.

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

□Chairman ⁻	Name: KEVIN R.MILLER	□ Chairman	Name:	
	Address:	□Vice Chairman	Address:	
Director	MARION, MI 49665	Director		
■ President		□President		
□Vice President		□Vice President		
■ Secretary	□ Treasurer	□Secretary		☐ Treasurer
Other	Other	Other	_	Other
□Chairman □Vice Chairman	DENISE M MILLER Name: 519 E MAIN STREET Address:	□Chairman □Vice Chairman	 -	
Director	MARION, MI 49665	□Director		
□President		□President		
■Vice President		□Vice President		
☐ Secretary	□Treasurer	☐Secretary		□Treasurer
Other	□Other	Other		Other
□Chairman	Name:	□Chairman		
		Director		
Director		□President		
□President		□Vice President		
	□Treasurer	Secretary		☐ Treasurer
☐Secretary		Other		□ Other
Important Notice: individuals may b 12. The officer or dire she is aware that is s.817.155, F.S.	Use an attachment to report more than six (6). The attachment added to the index when filing your Florida Department Signature of Director of Signature of Director of the comment (and who is listed in number false information submitted in a document to the Department of the Departm	or Officer,	that the facts state	d herein are true and that he or
she is aware that t	false information submitted in a document to the Depart	ment of State consti	inces a unud degre	e reiony as provided i



Department of Licensing and Regulatory Affairs

Lansing, Michigan

This is to Certify That

MAIN STREET ELECTRIC, INC.

was validly incorporated on July 27, 2001 as a Michigan DOMESTIC PROFIT CORPORATION, and said corporation is validly in existence under the laws of this state.

This certificate is issued pursuant to the provisions of 1972 PA 284 to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to transact business and for no other purpose.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 17th day of May, 2023.

Linda Clegg, Director

Corporations, Securities & Commercial Licensing Bureau