# L23000526510

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
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(Business Entity Name)
(Document Number)
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7 10: 5**5** 

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

SUBJECT: _	MES M	enagement of Florida, LLC (PROPOSED CORPO	C RATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are a	an original	and one (1) copy of the	articles of incorporation and	d a check for:
□ \$70 Filing	Fee I	3 \$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate of Status  PY REQUIRED

FROM: _	Patrick Tewes
	Name (Printed or typed)
	20979 5th Avenue W
	Address
	Cudjoe Key, FL 33042
-	City, State & Zip
	443-790-5738
	Daytime Telephone number
	patrick@marinetectricsystems.net
_	E-mail address: (to be used for future annual report notification)

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

name of the corpor			
	<u>CIPAL OFFICE</u> Principal <u>street</u> address		Mailing address, if different is:
979 5th Ave W dioe Kev_FL_33	3042		· · · · · · · · · · · · · · · · · · ·
<u>.,,                                   </u>			
riclejij puri	POSE		
purpose for which	the corporation is organized is: Ma	nagement company	
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TICLE IV SHAL	RES		
TICLE IV SHALE in number of shares of	RES of stock is:		
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number of shares of the shares	of stock is:	<u> </u>	Melissa Tewes
number of shares of the shares of the shares of the share and Tu	of stock is:  IAL OFFICERS AND/OR DIRECTOR  Jee Patrick Tewes	RS Name and Title	Melissa Tewes 20979 5th Ave W
number of shares of the shares	of stock is:  IAL OFFICERS AND/OR DIRECTOR  Je- Patrick Tewes  20979 5th Ave W	<u> </u>	20979 5th Ave W
number of shares of the shares of the shares of the share and Tu	of stock is:  IAL OFFICERS AND/OR DIRECTOR  Jee Patrick Tewes	RS Name and Title	
number of shares of the shares of the shares of the share and Tu	of stock is:  IAL OFFICERS AND/OR DIRECTOR  Je- Patrick Tewes  20979 5th Ave W	Name and Title   Address:	20979 5th Ave W
number of shares of the shares of the shares of the share and Tu	of stock is:  AL OFFICERS AND/OR DIRECTOR  Je: Patrick Tewes  20979 5th Ave W  Cudjoe Key, FI 33042	Name and Title   Address:	20979 5th Ave W  Cudjoe Key, F! 33042
number of shares of the shares of the shares of the share and Tu-Address	of stock is:	Name and Title	20979 5th Ave W  Cudjoe Key, F! 33042
number of shares of TICLE V INITA  Name and Tit  Address  Name and Titl	of stock is:  AL OFFICERS AND/OR DIRECTOR  Je: Patrick Tewes  20979 5th Ave W  Cudjoe Key, FI 33042	Name and Title	20979 5th Ave W  Cudjoe Key, Ft 33042
number of shares of TICLE V INITA  Name and Tit  Address  Name and Titl	of stock is:	Name and Title	20979 5th Ave W  Cudjoe Key, Ft 33042
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number of shares of TICLE V INITAL Name and Tu-Address  Name and Title Address	of stock is:  LAL OFFICERS AND/OR DIRECTOR  Je: Patrick Tewes  20979 5th Ave W  Cudjoe Key, FI 33042  e:	Name and Title	20979 5th Ave W  Cudjoe Key, Ft 33042
number of shares of TICLE V INTERMEDIATE Address  Name and Titl Address  Name and Titl Address	of stock is:  LAL OFFICERS AND/OR DIRECTOR  Je- Patrick Tewes  20979 5th Ave W  Cudjoe Key, Fl 33042  e:	Name and Title	20979 5th Ave W  Cudjoe Key, Fl 33042
number of shares of TICLE V INITAL Name and Tu-Address  Name and Title Address	of stock is:  LAL OFFICERS AND/OR DIRECTOR  Je: Patrick Tewes  20979 5th Ave W  Cudjoe Key, FI 33042  e:	Name and Title	20979 5th Ave W  Cudjoe Key, Ft 33042

Address		Address:
		<u> </u>
	<u>REGISTERED AGENT</u> orida <u>street address</u> (P.O. Box NOT accepta	able) of the registered agent is:
Name:	Patrick Tewes	
Address:	20979 5th Ave W	
	Cudjoe Key. FL 33042	
<u>ARTICLE VII</u>	INCORPORATOR	
The name and ad	dress of the Incorporator is:	
Name:	Patrick Tewes	
Address:	20979 5th Ave W	
	Cudjoe Key, FI 33042	
(If an effective d filing.)  Note: If the date		l cannot be more than five days prior or 90 days after the discable statutory filing requirements, this date will not be listed a
	amiliar with and accept the appointment as r	vocess for the above stated corporation at the place designated in the registered agent and agree to act in this capacity.
	Pater Juna Required Signature/Registered Age	1) 3/2023 Date
I submit this doc		in are true. I am aware that the false information submitted in

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

SUBJECT: ME	S Management of Florida, LLC				
	(PROPOSED CORPOR)	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)		
Enclosed are an ori	ginal and one (1) copy of the ar	ticles of incorporation and	i a check for:		
□ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy  ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED		
FROM:	Patrick Tewes				
_	Nam	e (Printed or typed)			
	20979 5th Avenue W				
	Address				
	Cudjoe Key. FL 33042				
	City,	State & Zip	***		
	443-790-5738				
	Daytime T	elephone number			

patrick@marinelectricsystems.net

MES Management of Florida, LLC

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

E-mail address: (to be used for future annual report notification)

Principal street address Mailing address, if different is:  79 5th Ave W joe Key, FL 33042    CLE IV SHARES   Management company	name of the corp	oration shall be: MES Managemen	t of Florida, LLC	
ICLE IV SHARES uniber of shares of stock is:  ICLE V INITIAL OFFICERS AND/OR DIRECTORS  Name and Title: Patrick Tewes Name and Title: Melissa Tewes  Address 20979 5th Ave W Address: 20979 5th Ave W  Cudjoe Key, Fl 33042 Cudjoe Key, Fl 33042  Name and Title: Name and Title: Name and Title: Address Addr	<i>TCLETT PRI</i> 979 5th Ave W	NCIPAL OFFICE Principal street address		_
Management company  Malagement company  Malage	lioe Key, FL 3	33042		
ICLE IV SILARES  number of shares of stock is:  ICLE V INITIAL OFFICERS AND/OR DIRECTORS  Name and Title: Patrick Tewes Name and Title: Melissa Tewes  Address 20979 5th Ave W Address: 20979 5th Ave W  Cudjoe Key, Fl 33042 Cudjoe Key, Fl 33042  Name and Title: Name and Title: Address  Name and Title: Name and Title: Address	77 F 111 - PUL	PPOSE	nagement company	
ICLE IV SILARES number of shares of stock is:  ICLE V INITIAL OFFICERS AND/OR DIRECTORS  Name and Title: Patrick Tewes Name and Title: Melissa Tewes  Address 20979 5th Ave W Address: 20979 5th Ave W  Cudjoe Key, Fl 33042 Cudjoe Key, Fl 33042  Name and Title: Name and Title: Address  Name and Title: Name and Title: Address				
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FICLE IV SILARES number of shares of stock is:  FICLE V INITIAL OFFICERS AND/OR DIRECTORS  Name and Title: Patrick Tewes Name and Title: Melissa Tewes  Address 20979 5th Ave W Address: 20979 5th Ave W  Cudjoe Key, Fl 33042 Cudjoe Key, Fl 33042  Name and Title: Name and Title: Address: Address:  Name and Title: Name and Title: Address: Address				
TICLE IV SHARES  roumber of shares of stock is:  TICLE V INITIAL OFFICERS AND/OR DIRECTORS  Name and Title: Patrick Tewes Name and Title: Melissa Tewes  Address 20979 5th Ave W Address: 20979 5th Ave W  Cudjoe Key, Fl 33042 Cudjoe Key, Fl 33042  Name and Title: Name and Title: Address: Addr				
Address         20979 5th Ave W         Address:         20979 5th Ave W           Cudjoe Key, Fl 33042         Cudjoe Key, Fl 33042           Name and Title:         Name and Title:           Address         Address:	<del></del>			
Address         20979 5th Ave W         Address:         20979 5th Ave W           Cudjoe Key, Fl 33042         Cudjoe Key, Fl 33042           Name and Title:         Name and Title:           Address         Address:	TICLE V INIT	SIAL OFFICERS AND/OR DIRECTOR	<u>2.S</u>	Melicea Towns
Name and Title:  Address  Name and Title:		20979 5th Ava M		
Address  Address:  Name and Title:  Address				Cudjoe Key, FI 33042
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Address Address:				
	Name and Titl		<del></del> -	
		e:	Name and Title	

Name a	nd Title:	Name and Title:
Addres		
ARTICLE VI	REGISTERED AGENT	
	lorida street address (P.O. Box NOT acceptate Patrick Tewes	ole) of the registered agent is:
Name: Address:	20979 5th Ave W	
Address.	Cudjoe Key, FL 33042	<del></del>
	INCORPORATOR	
The name and ac	ddress of the Incorporator is:	
Name:	Patrick Tewes	<u> </u>
Address:	20979 5th Ave W	
	Cudjoe Key, Fl 33042	
ARTICLE VIII	EFFECTIVE DATE:	
Effective date, if	other than the date of filing: 01/01/2023	. (OPTIONAL) annot be more than five days prior or 90 days after
filing.)	are is usicu. The date must be specific and ex	annot be more than five days prior or 90 days after
Note: If the date	inserted in this block does not meet the applic	able statutory filing requirements, this date will not be
the document ser	ffective date on the Department of State's reco	iras.
Having been nam certificate, I am fo	ed as registered agent to accept service of proce imiliar with and accept the appointment as reg	ess for the above stated corporation at the place designal
	Paten Signature/Registered Agent	
I submit this docu	ment and affirm that the facts stated herein Department of State constitutes a third degree fe	are true. I am aware that the false information subn

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

SUBJECT:	MES Management of Florida, LLC		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an	original and one (1) copy of the art	icles of incorporation and	d a check for:
□ \$70.00 Filing Fe		□ \$78.75 Filing Fee & Certified Copy	& Certificate of Status
		ADDITIONAL CO	OPY REQUIRED
FROM:	Patrick Tewes	e (Printed or typed)	
	20979 5th Avenue W		
		Address	
	Cudjoe Key, FL 33042		
-	City,	State & Zip	
	443-790-5738		
•	Daytime T	elephone number	
_	patrick@marinelectricsystems		
	E-mail address: (to be used	I for future annual report of	otification)

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

CLE I NAM ame of the corpo	<u>E</u> ation shall be:_	MES Managemen	it of Florida, LLC	
<i>CLETI PRIN</i> 79 5th Ave W	CIPAL OFFICE Principal stre	<u>CE</u> eet address		Mailing address, if different is:
oe Key, FL 3:	3042			
CLE III PURI	POSE	on is organized is: Ma	nagement company	
<del></del>				
	<u> </u>			
				J
CLE IV SHAP	RES f stock is: AL OFFICERS le:Patrick T	<i>S AND/OR DIRECTOR</i> ewes	RS Name and Title	
CLE IV SHAP	RES f stock is: AL OFFICERS le:Patrick T	S AND/OR DIRECTOR	RS Name and Title	
CLE IV SHAP umber of shares of CLE V INITE Name and Tit	RES f stock is:	<i>S AND/OR DIRECTOR</i> ewes	RS Name and Title	: <u>Melissa Tewes</u>
CLE IV SHAI imber of shares of CLE V INITE	RES f stock is: AL OFFICERS de:Patrick T 20979 5th Cudjoe Ke	<i>S AND/OR DIRECTOR</i> Tewes Ave W	RS Name and Title	: Melissa Tewes 20979 5th Ave W Cudjoe Key, Fl 33042
CLE IV SHAI umber of shares of CLE V INITE Name and Tit Address	RES f stock is:  AL OFFICERS  de: Patrick T 20979 5th  Cudjoe Ke	S AND/OR DIRECTOR Tewes Ave W ey, FI 33042	Name and Title   Address:	: Melissa Tewes 20979 5th Ave W Cudjoe Key, Fl 33042
CLE IV SHAP umber of shares of CLE V INITE Name and Tite Address	RES f stock is:  AL OFFICERS  de: Patrick T 20979 5th  Cudjoe Ke	S AND/OR DIRECTOR Tewes Ave W ey, FI 33042	Name and Title   Address:	: Melissa Tewes 20979 5th Ave W Cudjoe Key, Fl 33042
CLE IV SHAL umber of shares of CLE V INITI Name and Tit Address  Name and Title Address	f stock is:  AL OFFICERS  1e: Patrick T  20979 5th  Cudjoe Ke	S AND/OR DIRECTOR Tewes Ave W ey, FI 33042	Name and Title	: Melissa Tewes 20979 5th Ave W Cudjoe Key, Fl 33042

Name and T	itle:	Name and Title:
Address		Address:
	GISTERED AGENT da street address (P.O. Box NOT acceptable)	of the registered agent is:
Name:	Patrick Tewes	_
Address:	20979 5th Ave W	_
_	Cudjoe Key, FL 33042	
ARTICLE VII _IN	<u>CORPORATOR</u>	
The name and addr	ess of the Incorporator is:	
Name:	Patrick Tewes	_
Address:	20979 5th Ave W	_
	Cudjoe Key, Fl 33042	
Effective date, if off (If an effective date filing.)		not be more than five days prior or 90 days after the
Note: If the date in the document's effective the document's effective the document's effective the document's effective the date in the d	serted in this block does not meet the applicate ctive date on the Department of State's record	ele statutory filing requirements, this date will not be listed as is.
Having been named certificate, I am fam	as registered agent to accept service of proces: iliar with and accept the appointment as regis	s for the above stated corporation at the place designated in this tered agent and agree to act in this capacity
	Patul Lem Required Signature/Registered Agent	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
I submit this docum document to the Dep		re true. I am aware that the false information submitted in a
	Patahen	1/3/2023
Required Signature/	Incorporator	Date )

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

SUBJECT:	MES Management of Florida,	MES Management of Florida, LLC				
	(PROPOSED COR	RPORAT	E NAMÉ – <u>MUST INCL</u> I	JDE SUFFIX)		
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□ \$70 Filing		S	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status		
		L	ADDITIONAL CO	PY KEQUIKED		
FROM	∄:Patrick Tewes	Name (	Printed or typed)			
	20979 5th Avenue W					
		Address				
	Cudjoe Key, FL 33042					
		City, State & Zip				
-	443-790-5738	443-790-5738				
	Dayt	Daytime Telephone number				
	patrick@marinelectricsys					
			or future annual report no	otification)		

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

KIICLE II	PRINCIPAL OFFICE		
20979 5th Av	e W Principal street address		Mailing add 12 12
udjoe Key, F	L 33042		Mailing address, if different is:
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OTICLE III			
e purpose for v	<u>PURPOSE</u> which the corporation is organized is:	A4	
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Name and Tale	TIAL OFFICERS AND/OR DIRECTO  Title: Patrick Tewes 20979 5th Ave W  Cudjoe Key, Fl 33042	Name and Ti Address:  Name and Ti	20979 5th Ave W Cudjoe Key, Fl 33042
CLE V INI  Name and T  Address	TIAL OFFICERS AND/OR DIRECTO  Title: Patrick Tewes  20979 5th Ave W  Cudjoe Key, Fl 33042	Name and Ti Address:  Name and Ti	20979 5th Ave W
CLE V INI  Name and T  Address	TIAL OFFICERS AND/OR DIRECTO  Title: Patrick Tewes 20979 5th Ave W  Cudjoe Key, Fl 33042	Name and Ti Address:  Name and Ti	20979 5th Ave W Cudjoe Key, Fl 33042
CLE V INI  Name and T  Address	TIAL OFFICERS AND/OR DIRECTO  Title: Patrick Tewes 20979 5th Ave W  Cudjoe Key, Fl 33042	Name and Ti Address:  Name and Ti	20979 5th Ave W Cudjoe Key, Fl 33042
CLE V INI  Name and T  Address  Name and Titl  Address	TIAL OFFICERS AND/OR DIRECTO  Title: Patrick Tewes  20979 5th Ave W  Cudjoe Key, Fl 33042	Name and Ti Address:  Name and Titl Address:	20979 5th Ave W  Cudjoe Key, FI 33042
CLE V INI  Name and T  Address  Name and Title  Address	TIAL OFFICERS AND/OR DIRECTO  Title: Patrick Tewes  20979 5th Ave W  Cudjoe Key, Fl 33042	Name and Ti Address:  Name and Titl Address:	20979 5th Ave W  Cudjoe Key, FI 33042
CLE V INI  Name and T  Address  Name and Title  Address	TIAL OFFICERS AND/OR DIRECTO  Title: Patrick Tewes  20979 5th Ave W  Cudjoe Key, FI 33042	Name and Ti Address:  Name and Title  Name and Title	20979 5th Ave W  Cudjoe Key, FI 33042
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Name and Title:		Name and Title:	
Address		Address:	
ARTICLE VI The name and Fl	REGISTERED AGENT orida street address (P.O. Box NOT accept	able) of the registered agent is:	
Name:	Patrick Tewes		
Address:	20979 5th Ave W		
	Cudjoe Key, FL 33042	<del></del>	
ARTICLE VII	INCORPORATOR		
The name and ad	dress of the Incorporator is:		
Name:	Patrick Tewes		
Address:	20979 5th Ave W		
	Cudjoe Key, Fl 33042	<del></del>	
Effective date, if o	EFFECTIVE DATE: 01/01/2023 ther than the date of filing: 01/01/2023 the is listed, the date must be specific and	. (OPTIONAL) cannot be more than five days prior or 90 days after the	
Note: If the date i the document's eff	nserted in this block does not meet the appl fective date on the Department of State's rec	icable statutory filing requirements, this date will not be liste cords.	d as
Having been name certificate, I am fai	d as registered agent to accept service of pro miliar with and accept the appointment as re	cess for the above stated corporation at the place designated in egistered agent and agree to act in this capacity	n this
	Required Signature/Registered Agen		
		• •	—
	pariment of State Constitutes a thira degree	n are true. I am aware that the false information submitted felony as provided for in s.817.155, F.S.	'in a
D-200	Patellen	14 3/ 2023	
wednited Signature	/incorporator	Date	—