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(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name)
(Address) (City/State/Zîp/Phone #) PICK-UP WAIT MAIL (Business Entity Name)
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name)
PICK-UP WAIT MAIL (Business Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:



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D2 NOV 12 AN IO: 2

Office Use Only

11-14-02

TRANSMITTAL LETTER

ONES ELECTRONICS REPOINC.

(PROPOSED CORPORATE NAME-MUST INCLUDE SUFFIX)

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

3

Enclosed are an orig	rinal and one (1) copy of the art	icles of incorporation and	l a check for:	
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:	Daniel +	One (Printed or typed)		
1885 NW 57th Str				
	Miami	FL 33/6	/	
	(305) 634	State & Zip -9063 Telephone number	·	

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)	02 NOV 12 AM 10: 21
ARTICLE I NAME The name of the corporation shall be:	SECRETART OF STATE TALLAHASSEE, FLORIDA
HONES ELECTRONICS	REPOINC.
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	
MIANI FL 33142 ARTICLE III PURPOSE The purpose for which the corporation is organized is:	
BuiLDING, REPAIR, SALES	
ARTICLE IV SHARES The number of shares of stock is:	-
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s): (Owner) Daniel Horas 1885 NW 57th Str, Miami FL 33142	
The name and Florida street address of the registered agent is: Daniel Hones 1885 NW 57th Str, Miam, FL 33142	re i
The name and address of the Incorporator is: Demill fonds 1885 NW 57th Str. Marmi Fr. 33142	
Having been named as registered agent to accept service of process for the above stated corporation at certificate, I am familiar with and accept the appointment as registered agent and agree to act in this cap Signature/Registered Agent	the place designated in this pacity Date
Signature/Incorporator 11/1	0/2002 Date