P0400011109

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





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TRANSMITTAL LETTER

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

SUBJECT: Electro-	Mech International, Inc., dba E. M (PROPOSED CORPORA)	I. Imports	nne Sheel V
	(I ROI OSED COM ONA	I B IVANIS - <u>MOST INCE</u>	ODE SCITIA)
Enclosed are an orig	inal and one (1) copy of the artic	cles of incorporation and	a check for:
□ \$70.00 Filing Fee		□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM: Pat	tricia West		
	Name	(Printed or typed)	
	610 Cross Creek Drive	Address	
<u>:</u>	Sebastian, FL 32958	State & Zip	
	City,	oute & Lip	
	772-321-1936	elephone number	
	Dayunc I	erebrious nament	

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)

- E

ARTICLE I NAME

The name of the corporation shall be:

04 JUL 28 PM 2:55

Electro-Mech International, Inc.

ANTAHASS, E. FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 610 Cross Creek Drive
Sebastian, FL 32958

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Importing for wholesale and retail purposes

ARTICLE IV SHARES

The number of shares of stock is: 200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Patricia West, 610 Cross Creek Drive, Sebastian, FL 32958 President Todd West, 610 Cross Creek Drive, Sebastian, FL 32958 Vice President

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Patricia West, 610 Cross Creek Drive, Sebastian, FL 32958

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Patricia West, 610 Cross Creek Drive, Sebastian, FL 32958

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent

Date

Signature/Incorporator

Date