## P06000118606

(Requ	estor's Name)	,	
(Address)			
(Addre	ess)		
(City/S	State/Zip/Phone	#)	
PICK-UP	☐ WAIT	MAIL	
^(Business Entity Name)			
(Docu Certified Copies	ment Number) Certificates	of Status	
Special Instructions to File Dous Las U AUTHORIZATION BY CORRECT JULY DATE 9/14/0 C DOC. EXAM	Caller	DAVE Z	

Office Use Only



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## **COVER LETTER**

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

SUBJECT: Phoenix Flectronics Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

closed are an original and one (1) copy of the articles of incorporation and 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: Gail P. Waller Name (Printed or typed)
Name (Printed or typed)
7460 Wayland Blvd.
Address
Orlando, FL 32807 City, State & Zip
City, State & Zip
4/07-678-5419  Daytime Telephone number

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

original

ARTICLES OF INCORPORATION	
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
ARTICLE I NAME	FILED
The name of the corporation shall be:	20 OFF 11 PM 12: 19
Phoenix Electronics Inc.	06 SEP 11 PM 12: 19
ARTICLE II PRINCIPAL OFFICE  The principal place of business/mailing address is:	SECRETARY OF STATE TALLAHASSEE, FLORIDA
7460 Wayland BIVd. Orlando	, V-L 33-801
ARTICLE III PURPOSE  The purpose for which the corporation is organized is:	
Retail Sales	
ARTICLE IV SHARES The number of shares of stock is:	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTOR List name(s), address(es) and specific title(s):	<u>s</u>
O MA NOTE OF THE PARTY OF THE P	
7460 Wayland BIVd. Orlando, F	L 32807
Q E O	
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT acceptable) of	the registered agent is:
Gail Wallet	
7460 Wayland Brud Orland o, F1	32601
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
Gail Wallet	N F1 32807
Gail Wallet 7460 Wayland BIVD. Orland	0,17.50-0
********************	*********
Having been named as registered agent to accept service of process for the above certificate, I am familiar with and accept the appointment as registered agent and a	
Raich. Waller	9-6-06 Date
Signature/Registered Agent Gail, Waller	
Gail P. Wally	9-6-06
Signature/Incorporator	Date
Gail & Wallet	

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