000001437/

(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Business Eliai, Harris)
(Document Number)
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SECRETARY OF STATE
DIVISION OF CORPORATIONS

MD 2/17

COVER LETTER

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

SUBJECT:	SWIFT ELECTRIC,	INC		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	ginal and one (1) copy of the arti	cles of incorporation and	a check for:	
	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	Certified Copy & Certificate of Status	
ADDITIO			PY REQUIRED	
	394 MARS AVE	(Printed or typed)		
<u></u>	ел РАСМ ЗЕАСН City,	Address FL - 33406 State & Zip	5	
	561 - 644 - 0 Daytime T	-		
	KUDYBA @ COM		otification)	
E-mail address: (to be used for future annual report notification)				

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

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 607	21, F.S. (Profit)	
ARTICLE I NAME	,	
The name of the corporation shall be:		<u>.</u> 9
		OF VSE
SNIFT ELECTRIC. I.	$\mathcal{D}^{\mathcal{C}}$	CRETA ION OF
ARTICLE II PRINCIPAL OFFICE		RY COR
The principal street address and mailing address, if	different is:	
4394 MARS AVE		STATE)RATION 3: 37
WEST PALM BEACH FL 33	3406	ED STATE OF
ARTICLE III PURPOSE The purpose for which the corporation is organized.	ed is:	
PROFIT - PROFESSIONAL (
ARTICLE IV SHARES The number of shares of stock is: /OC ARTICLE V INITIAL OFFICERS AND/ List name(s), address(es) and specific title(s):		
RICHARD KUDYBA 4394 MARS	AVE P.	
DANIEL SWIFT 4414 MARS	Auc V.	
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box N	JOT accontable) of the registered agent is:	
		~
RICHARD KUDYBA 1/394 MA	IRS AUC N.P.B.FL 33406	•
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:		
RICHARD IZUDYBA 4394 M.	10 C 1110 1100 11 776	106
KIENTIES 12001011 4344 710	ALS FICE W.P.O. FC 337	,00
************	*********	****
Having been named as registered agent to accep		
place designated in this certificate, I am familian agree to act in this capacity	· ·	
aread Velelor	2-9-10	
Signature/Registered Agent / TA	ICORPIRATOR Date	
Signature/Incorporator	Date	