

A110000060373

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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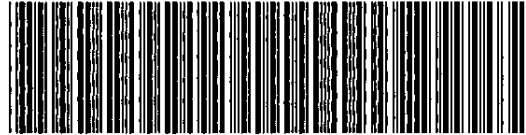
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
11 JUN 27 PM 1:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JF 6/28

COVER LETTER

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

SUBJECT: Equipment Industries Corp.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed 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
☐ \$87.50 Filing Fee,
Certified Copy
& Certificate of
Status
ADDITIONAL COPY REQUIRED

FROM: Raul Justiniano
Name (Printed or typed)

231 NW 109 Avenue # 207
Address

Miami, Florida 33172
City, State & Zip

954-282-1356
Daytime Telephone number

equipmentindustries@hotmail.com
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

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)

ARTICLE I NAME

The name of the corporation shall be: **Equipment Industries Corp.**

ARTICLE II PRINCIPAL OFFICE

Principal street address
20928 Sheridan Street
Pembroke Pines
Florida 33029

Mailing address, if different is:

231 NW 109 Avenue # 207
Miami, Florida 33172

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The corporation shall engage in any activity or business permitted under the laws of the United States and of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is: **50,000**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Raul Justiniano PST
Address: 231 NW 109 Avenue # 207
Miami, Florida 33172

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

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TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

Name: Raul Justiniano
Address: 231 NW 109 Avenue # 207
Miami, Florida 33172

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Raul Justiniano
Address: 231 NW 109 Avenue # 207
Miami, Florida 33172

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

Raul Justiniano
Required Signature/Registered Agent

06/22/2011
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Raul Justiniano
Required Signature/Incorporator

06/22/2011
Date