## P13000030864

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(Address)
(Address)
(City/State/Zip/Phone #)
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(Document Number)
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SCORE OF STATE

J. Shivere Ark 0.4 2015 274



## FLORIDA DEPARTMENT OF STATE Division of Corporations

March 14, 2013

MARLON TORUNO 2120 SW 4TH ST APT 5 MIAMI, FL 33135

SUBJECT: M.T. ELECTRICAL CORP.

Ref. Number: W13000015234

We have received your document for M.T. ELECTRICAL CORP. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

The registered agent must sign accepting the designation.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Justin M Shivers Regulatory Specialist II New Filing Section

Letter Number: 813A00006123

Division of Communations D.O. DOV 0997 Mellahaman Divida 9991

## **COVER LETTER**

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

SUBJECT: M.T	. ELECTRICAL					
(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u> )						
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  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status  PPY REOUIRED			

FROM: MARLON TORUN	10
	e (Printed or typed)
2120 SW 4TH ST	REET APT. 5
	Address
MIAMI, FLORIDA	33135
City,	State & Zip
(202) 500-8083	
Daytime T	elephone number
MARLONTORUNG E-mail address: (to be use	O@MSN.COM ad 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 621, F.S. (Profit)

CLE II 1	PRINCIPAL OFFICE Principal street address	Mailing add	lress, if different is:	
SW ATH STRA	EET APT. 5 MIAMI, FLORIDA 33135		Maining address, it different is.	
ICLE III P	<b>PURPOSE</b> TO DO EL ich the corporation is organized is:	ECTRICAL WORK AND O	THER LEGAL BUSINES	
urpose for will	ten the corporation is organized is.			
_ <del>_</del>				
<del></del>				
ICLE IV S	SHARES 1000			
	INITIAL OFFICERS AND/OR DIRECTO			
	INITIAL OFFICERS AND/OR DIRECTO	<b>RS</b> Name and Title:		
ICLE V	INITIAL OFFICERS AND/OR DIRECTO			
Name and	INITIAL OFFICERS AND/OR DIRECTO Title:	Name and Title:		
Name and	INITIAL OFFICERS AND/OR DIRECTO Title:	Name and Title:		
Name and	INITIAL OFFICERS AND/OR DIRECTO Title:	Name and Title:		
Name and	INITIAL OFFICERS AND/OR DIRECTO Title:	Name and Title:	SILAILE C	
Name and Address	INITIAL OFFICERS AND/OR DIRECTO. Title:  2120 SW 4TH STREET APT. 5 MIAMI FLORIDA 33135	Name and Title: Address:	OT AN ACCORD	
Name and Address	Title:	Name and Title:  Address:  Name and Title:	OT AN ACCORD	
Name and Address	INITIAL OFFICERS AND/OR DIRECTO. Title:  2120 SW 4TH STREET APT. 5 MIAMI FLORIDA 33135	Name and Title:  Address:  Name and Title:	OT AN ACCORD	
Name and Address	INITIAL OFFICERS AND/OR DIRECTO Title:  MARLON TORUNO OWNER  2120 SW 4TH STREET APT. 5 MIAMI FLORIDA 33135	Name and Title:  Address:  Name and Title:  Address:	OT AN ACCORD	
Name and Address	Title:	Name and Title:  Address:  Name and Title:  Address:	OT AN ACCORD	
Name and Address	INITIAL OFFICERS AND/OR DIRECTO Title:  MARLON TORUNO OWNER  2120 SW 4TH STREET APT. 5 MIAMI FLORIDA 33135	Name and Title:  Address:  Name and Title:  Address:	OT AN ANGE OF	
Name and Address	INITIAL OFFICERS AND/OR DIRECTO Title:  MARLON TORUNO OWNER  2120 SW 4TH STREET APT. 5 MIAMI FLORIDA 33135	Name and Title:  Address:  Name and Title:  Address:	OT AN ACCORD	
Name and Address  Name and Address	INITIAL OFFICERS AND/OR DIRECTO Title:  MARLON TORUNO OWNER  2120 SW 4TH STREET APT. 5 MIAMI FLORIDA 33135	Name and Title:  Address:  Name and Title:  Address:	OLLAHANSE FLORIDA	
Name and Address  Name and Address	INITIAL OFFICERS AND/OR DIRECTO Title:  MARLON TORUNO OWNER  2120 SW 4TH STREET APT. 5 MIAMI FLORIDA 33135	Name and Title:  Address:  Name and Title:  Address:  Name and Title:	OLLAHANSE FLORIDA	

Name and	Title:	Name and Title:	
Address	·	Address:	
ARTICLE VI	REGISTERED AGENT		
The <u>name and Flo</u>	orida street address (P.O. Box NOT acceptable)	of the registered agent is:	
Name:	MARLON TORUNO		
Address:	2120 SW 4TH STREET APT, 5 MIAMI, FLORIDA 33135	_	
Address.		_	
ARTICLE VII	INCORPORATOR	So <del>u</del>	
The <u>name and ad</u>	dress of the Incorporator is:	75 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
Name:	MARLON TORUNO		
Address:	2120 SW 4TH STREET APT 5 MIAMI. FLORIDA 33135		
		PH 12: _	
		- ATE RIDA	
	ed as registered agent to accept service of proces on familiar with and accept the appointment as re	ss for the above stated corporation at the place designated in	
,,	111 17 -		
	1 Soluto	04-02-13	
	Required Signature/Registered Agent	Date	
	ument and affirm tha <sup>l</sup> the facts stated herein ar. Department of State constitutes a third degree felo	e true. I am aware that the false information submitted in a ony as provided for in s.817.155, F.S.	
	Morino	04-02-13	
	Required Signature/Incorporator	Date	