

MAY-31 5/30/13

Fr

850-617

3/4

Division of Corporations

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H13000119228 3)))



H130001192283ARC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations  
Fax Number : (850) 617-6381

From:

Account Name : KRISJOENNA SERVICES, INC.  
Account Number : 120080000033  
Phone : (305) 644-3055  
Fax Number : (305) 644-3052

RECEIVED  
13 MAY 31 PM 12:52  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

*06/03/13*

FLORIDA PROFIT/NON PROFIT CORPORATION  
CAAL ELECTRICAL CORPORATION

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$78.75

*06/03/13*

RECEIVED  
13 MAY 31 AM 10:51  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

MAY-31-2013 07:47 From:

To: 850 617 6381

P.2/4

May 27, 2013

**Florida Department of State**

Attention: New Filing Section

To Whom It May Concern:

FILED  
13 MAY 31 PM 12:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

This is to advise you that the owner of **CAAL ELECTRICAL CORPORATION**, of  
Doc # **P06000079436**, is the same owners of the attached articles of  
incorporation. We have dissolved the company and have no intention of  
reopening it.

Thank you for your help in this matter.

*Jose Lencina*  
Very Sincerely,

## **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:

**CAAL ELECTRICAL CORPORATION**

### **ARTICLE II PRINCIPAL OFFICE**

Principal and Mailing street address:

**2145 SW 50 AVE  
Fort Lauderdale, FL 33317**

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

**ANY AND ALL PURPOSES**

### **ARTICLE IV SHARES**

The number of shares of stock is: 100

### **ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Title: **PRESIDENT**  
Name: **JOSE MENCIAS**  
Address: **2145 SW 50 AVE  
Fort Lauderdale, FL 33317**

### **ARTICLE VI REGISTERED AGENT**

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

Name: **JOSE MENCIAS**  
Address: **2145 SW 50 AVE  
Fort Lauderdale, FL 33317**

### **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: **JOSE MENCIAS**  
Address: **2145 SW 50 AVE  
Fort Lauderdale, FL 33317**

*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*

Date: May 27, 2013

Jose Mencias  
Required Signature/Registered Agent

*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.*

Date: May 27, 2013

Jose Mencias  
Required Signature/Incorporator

FILED  
13 MAY 31 PM 12:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA