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(Red	questor's Name)	
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(City	y/State/Zip/Phone	#\
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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SECRETARY OF STATE
FALLAHASSEF FINALE

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COVER LETTER

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

SUBJECT:	ELECTRONICS RECYCLING INC
	(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)

nclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	d 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 CO	PY REQUIRED

ROM:	ANGEL F SEMPRUN
	Name (Printed or typed)
	6412 SW 23 ST
	Address
	MIRAMAR FLORIDA 33023
	City, State & Zip
	954 5129614
	Daytime Telephone number
	GATO.0421@HOTMAIL.COM
	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 621, F.S. (Profit)

TIÇLE II PR	*********			
110221 11	INCIPAL OFFICE Principal street address		Mailing address, it differ it js:	_
412 SW 23	ST	SAME		13 J
IRAMAR F	LORIDA 33023		HE A	- E
			SEE	22
TICLE III PUI	PROCE			3
purpose for which	the corporation is organized is: ALL LE	GAL TRAI	DE BUSSINES	<u>ب</u> بن
			DE	ယ
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· · · · · · · · · · · · · · · · · · ·				
			 	
number of shares of	ARES 100 AT \$1.00		·	
TICLE V IN	ITIAL OFFICERS AND/OR DIRECTOR		.N/A	
Name and Tit	TIAL OFFICERS AND/OR DIRECTOR le: ANGEL F SEMPRUN PRES.	Name and Title	N/A	
TICLE V IN	ATIAL OFFICERS AND/OR DIRECTOR Je: ANGEL F SEMPRUN PRES. 6412 SW 23 ST		N/A	
Name and Tit	ATIAL OFFICERS AND/OR DIRECTOR 1e: ANGEL F SEMPRUN PRES. 6412 SW 23 ST MIRAMAR FLORIDA	Name and Title	N/A	
Name and Tit	ATIAL OFFICERS AND/OR DIRECTOR Je: ANGEL F SEMPRUN PRES. 6412 SW 23 ST	Name and Title	N/A	
Name and Tit Address	ATIAL OFFICERS AND/OR DIRECTOR 1e: ANGEL F SEMPRUN PRES. 6412 SW 23 ST MIRAMAR FLORIDA	Name and Title Address:		
Name and Tit Address	ANGEL F SEMPRUN PRES. 6412 SW 23 ST MIRAMAR FLORIDA 33023	Name and Title Address: Name and Title		
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Name and Tit Address Name and Titl Address	ANGEL F SEMPRUN PRES. 6412 SW 23 ST MIRAMAR FLORIDA 33023	Name and Title Address: Name and Title Address:		

Name and	Title:	Name and Title:	
Address		Address:	
Name:	PREGISTERED AGENT Orida street address (P.O. Box NOT acceptable) of ANGEL F SEMPRUN 6412 SW 23 ST	the registered agent is:	13 . FALL
Address: ARTICLE VII	MIRAMAR FLORIDA 33023 INCORPORATOR		JUL 22 PH URETARY OF LAHASSEE, F
			25 % D
The <u>name and ad</u>	dress of the Incorporator is:		RED 33
Name:	ANGEL F SEMPRUN		D
Address:	6412 SW 23 ST		
	MIRAMAR FLORIDA 33023 ned as registered agent to accept service of process		
this certificate, I a	m fandillar with and accept the appointment as reg	istered agent and agree to	act in this capacity
	ک ^ر نفون)		07/16/2013
	Required Signature/Registered Agent		Date
	men and affirm that the facts stated herein are to eparation of State constitutes a third degree felony		
[المالين ا		07/16/2013
	Required Signature/Incorporator		Date