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(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
(Business Entity Name)
(Document Number)
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COVER LETTER

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

SUBJECT: MeVTech Corporation (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

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1 \$78.75
Filing Fee
& Certified Copy

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

FROM: Martin Shapiro

Name (Printed or typed)

115 Cape Pointe

Address

Jupiter, FL 33477

City, State & Zip

203-450-4280

Daytime Telephone number

mshapiro@ontech.us

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

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In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

The name of the corpor	ME MeVTech Corpora	tion					
	INCIPAL OFFICE						
AKTICDE II	Principal street address		Mailing addr	ess, if differer	nt is:		
115 Cape Po	inte	Same	Э		с. С.	<u>с</u> С	
Jupiter, FL 3	3477				1	C	':
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	<u>RPOSE</u>			F1.0	01	မ္မ	y sociale Ny faritr'
	the corporation is organized is:			R	<u>איג</u> ריז	03	
All legal activ	ities allowed in the State of	Florida		<u>حز</u>			
		<u> </u>					
					-		
				<u> </u>			
ARTICLÉ IV SH	ARES 1.000						
ARTICLE IV SH The number of shares c	<u>ARES</u> f stock is:						
		 S					
ARTICLE V IN	TIAL OFFICERS AND/OR DIRECTOR						
ARTICLE V IN	r <u>tial officers and/or director</u> _{le:} Martin Shapiro, President		:				
ARTICLE V IN	<u>TIAL OFFICERS AND/OR DIRECTOR</u> _{le:} Martin Shapiro, President 115 Cape Pointe		:				
ARTICLE V IN Name and Tit	r <u>tial officers and/or director</u> _{le:} Martin Shapiro, President	Name and Title	:				
ARTICLE V IN Name and Tit	<u>TIAL OFFICERS AND/OR DIRECTOR</u> _{le:} Martin Shapiro, President 115 Cape Pointe	Name and Title	:				
ARTICLE V IN Name and Tit	<u>TIAL OFFICERS AND/OR DIRECTOR</u> _{le:} Martin Shapiro, President 115 Cape Pointe	Name and Title	:				
ARTICLE V IN Name and Tit Address	<u>TIAL OFFICERS AND/OR DIRECTOR</u> le: Martin Shapiro, President 115 Cape Pointe Jupiter, FL 33477	Name and Title Address:					
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ARTICLE V IN Name and Tit Address Name and Titl Address	Antin Shapiro, President <u>115 Cape Pointe</u> Jupiter, FL 33477	Name and Title Address: Name and Title Address: Address: Name and Title					
ARTICLE V IN Name and Tit Address Name and Titl Address Name and Titl	Antin Shapiro, President <u>115 Cape Pointe</u> Jupiter, FL 33477 	Name and Title Address: Name and Title Address: Address: Name and Title					

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Address		_ Address:	
			, ¹²⁺ (; ; ,
ARTICLE VI	REGISTERED AGENT		
	Florida street address (P.O. Box NOT acceptable) c	of the registered agent is:	eg 😛 🧲
Name:	Martin Shapiro	-	RID,
Address:	115 Cape Pointe	_	
	Jupiter, FL 33477		
The <u>name and a</u> Name:	ddress of the Incorporator is: Martin Shapiro	-	
Address:	115 Cape Pointe	_	
	Jupiter, FL 33477	_	
	med as registered agent to accept service of proces am familiar with and accept the appointment as re		
