P1400006/346

(Requestor's Name)
(Address)
(Address)
(National)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
W14-42017

Office Use Only



000261782360

07/07/14--01008--002 **35.00

07/07/14--01008--003 **35.00

SECRETGRY OF STATE

14 JUL 18 PM 4:3



UH

COVER LETTER

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

SUBJECT: <u>5//</u>	ms Tec Electr	TEAL CORP.	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	i 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	
	Willie R. Sir		
	1610 callie c	+	
		Address	_
L	1 popks Fl.	32703	
·	City	, State & Zip	
*****	407-880-610. Daytime 1	3 407-44°	3-5095
L	E-mail address: (to be use		
	E-mail address: (to be use	ed for future annual report	notification)

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 8, 2014

WILLIE R. SIMS 1610 CALIE CT APOPKA, FL 32703

SUBJECT: SIMS TEC ELECTRICAL CORP.

Ref. Number: W14000042017

We have received your document for SIMS TEC ELECTRICAL CORP. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You have indicated in your document the ownership and percentages of the authorized shares. Please note this information is not required nor is it maintained by the Department of State. While we cannot require such, it is recommended that it be removed from the document. The only information needed for this filing is the number of authorized shares.

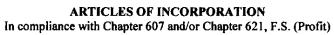
A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

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.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 214A00014695





RTICLE I NA	ration shall be:	··· / / / / / / / / / / / / / / / / / /	II/ECTI (CH	_ <0/2
	INCIPAL OFFICE Principal street add			SECRETARY OF STATE Mailing Address, 4F different 1810/
	F(, 32	703		
	the corporation is org	•	•	to work with
				s to do the
				· · · · · · · · · · · · · · · · · · ·
RTICLE V IN	TARES of stock is: ITIAL OFFICERS	AND/OR DIRECT		
RTICLE V IN	itial officers a	AND/OR DIRECT	Name and Title:	
RTICLE V IN	itial officers a le: Willie R.S 1610 CAD	AND/OR DIRECT	Name and Title: Address:	
Name and Ti	itial officers a le: Willie R.S 1610 CA Afopla e: THeresa S	AND/OR DIRECTO I'MS PRESING (I'MS CF FIL 3270	Name and Title: Address: Name and Title:	
Name and Ti	itial officers a le: Willie R.S 1610 CAD Apopla e: THeresa S 1610 CAD	AND/OR DIRECTO I'MS PRESING (I'MS CF FIL 3270	Name and Title: Address: Name and Title: Address:	
Name and Tit Address Name and Titl Address	e: THEREST S Afopla	AND/OR DIRECTO ins plesite line Ct FL 3270 Sims Secre lire Ct, FL, 3270	Name and Title: Address: Name and Title: Address: Address:	



(conti.)

Name and Title:	14 JUL 18 PM 4: 33
Address	Address: SECRETARY OF STATE TALLAHASSEE FLORIDA
Address	Address: TALLAHASSEE FLORIDA
•	
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT accepta	
Name: Willie R. Sims	
Address: 1610 CAllie Ct	
Name: Willie R. Sims Address: 1610 Calle Ct Apopla FC 3:	2743
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	willie D Soms
Name:	WINER, SIM
Address: 1610 CAllie C	t, Wille Ri Som
Apopla FL.	Willie R. Sims H. Wille R. Sims 7-15-14 process for the above stated corporation at the place designated in the service of
Having been named as registered agent to accept service of p this certificate, I am familiar with and accept the appointmen.	process for the above stated corporation at the place designated in t as registered agent and agree to act in this capacity
Wille R. Mossi Required Signature/Registered Age	
Required Signature/Registered Age	nt Date
I submit this document and affirm that the facts stated here document to the Department of State constitutes a third degre	in are true. I am aware that the false information submitted in a see felony as provided for in s.817.155, F.S.
41 the R.	7 3-10
Required Signature/Incorporator	7 3 - / 4 Date