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(Re	equestor's Name)		
, (Ad	ldress)		
(Ad	dress)		
(Cit	ty/State/Zip/Phone	#)	
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	Certificates	of Status	
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SECRETARY OF TABLE

MICHAELE COMMAN

× 07/29/14

July 17, 2014 Eifel Air Conditioning and Appliance Inc 2017 SW 36th Ter Cape Coral FL 33914

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

Respectfully-

Eifel Air Conditioning and Appliance Inc. has no intention of revoking dissolution of corporation document number PO6000040104 and release the corporation name for use.

Sincerely-

Karen Eifel

Vice President Eifel Air Conditioning and Appliance

kmeifel@hotmail.com eifelair@aol.com

239-292-5601

239-898-3752

JUL 28 MIT: 52

COVER LETTER

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

SUBJECT:	FEL AIR CONDITIONING	g AND Appliance	INC
	(PROPOSED CORPOR	ATE NAME – MUST INCL	<u>UDE SUFFIX</u>)
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation an	d a check for:
☐ \$70.00 Filing Fee	✗ \$78.75Filing Fee& Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy	-
		ADDITIONAL CO	DPY REQUIRED
FROM:	TIMOTHY EIFER Nan 2017 SW 36TH TER		,
		Address	
any definition and	CARE CORAL, FL	33914 v, State & Zip	
	239-898-3752		
	·	Telephone number	
	EIFELAIR @ AOL		
	E-mail address: (to be us	sed 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)

The name of the corporation shall be: Eifel Ai	- Conditioning and
ARTICLE II PRINCIPAL OFFICE CAPI	ance Inc.
Principal street address 2017 54) 364 Tex	Mailing address, if different is:
Cape Coral A. 339	/y
ARTICLE III PURPOSE	ny and All
The purpose for which the corporation is organized is:	
law to busines	3
	2542 17
	28
	—————————————————————————————————————
	10 == 10 >= == 57 ::: ''
	5 52
ARTICLE IV SHARES The number of shares of stock is: 500 CC Vau ARTICLE V INITIAL OFFICERS AND/OR DIRECT Name and Title: Timothy Eife Address 2017 Sur 3645 Cape Coral A Address 2017 5w3645 To Cape Coral A 33914	Name and Title: Name and Title: Name and Title:
Name and Title:Address	Name and Title: Address:

Name and Title:	Name and Title:
Address	Address:
ARTICLE VI REGISTERED AGENT	•
	- Box NOT acceptable) of the registered agent is:
Name: Kaven Zi	fel ====================================
Address: 2017 Su	336th Ter
cape con	<u> </u>
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	~· ()
Name: <u>Haren</u>	ZItel
Address: ZO17 Sy) 36th Ter
Cape Co	mal F1.33914
Having been named as registered agent to ac this certificate, I am familiar with and accept	ecept service of process for the above stated corporation at the place designated in the appointment as registered agent and agree to act in this capacity
Harry M. Required Signature	Registered Agent Date
I submit this document and affirm that the document to the Department of State constitu	facts stated herein are true. I am aware that the false information submitted in a tes a third degree felony as provided for in s.817.155, F.S.
Required Signati	ire/Incorporator Date