

P14000074274

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☐ PICK-UP

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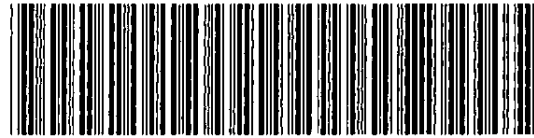
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DIVISION OF REVENUE
SEP -4 AM 8:21



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 18, 2014

CES MECHANICAL CORPORATION
13160 HEATHER MOSS DR SUITE 210B
ORLANDO, FL 32837

SUBJECT: CES MECHANICAL, CORP.
Ref. Number: W14000050233

FILED
14 SEP -4 11:10 AM
2014

We have received your document for CES MECHANICAL, CORP. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

A corporation may not serve as its own registered agent. Please designate the individual whose typed signature appears on the registered agent signature line.

A corporation may not serve as its own incorporator. Please designate the individual whose typed signature appears on the signature line.

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.

Tyrone Scott
Regulatory Specialist II
New Filings Section

Letter Number: 714A00017644

COVER LETTER

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

SUBJECT: CES MECHANICAL CORP.,
(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

☐ \$78.75
Filing Fee
& Certified Copy

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: CES MECHANICAL CORPORATION
Name (Printed or typed)
13160 HEATHER MOSS DR SUITE 210
Address
ORLANDO, FL 32837
City, State & Zip
407-730-8450
Daytime Telephone number
CESMECHANICAL@GMAIL.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)

ARTICLE I NAME

The name of the corporation shall be: CES MECHANICAL CORPORATION

ARTICLE II PRINCIPAL OFFICE

Principal street address

13160 HEATHER MOSS DRIVE SUITE 210

ORLANDO, FL 32837

407-730-8450

Mailing address, if different is:

13160 HEATHER MOSS DRIVE SUITE 210

ORLANDO, FL 32837

407-730-8450

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

AIR CONDITIONER REPAIRS, INSTALATION, MAINTENANCE

COMERCIAL AND RESIDENTIAL

ARTICLE IV SHARES

The number of shares of stock is: 2

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: COREY EMFINGER - PRESIDENT

Address: 13160 HEATHER MOSS DRIVE SUITE 210

ORLANDO, FL 32837

407-730-8450

Name and Title: _____

Address: _____

Name and Title: PILAR PULIDO - VICE-PRESIDENT

Address: 13160 HEATHER MOSS DRIVE SUITE 210

ORLANDO, FL 32837

407-730-8450

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

SEP 14 AM 8:21
STATE OF FLORIDA
DEPARTMENT OF REVENUE
TAXATION DIVISION

(conti.)

Name and Title: _____ Name and Title: _____
Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

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


Name: COREY EMFINGER
Address: 3956 TOWN CENTER BLVD SUITE #221
ORLANDO, FL 32837

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: COREY EMFINGER
Address: 3956 TOWN CENTER BLVD SUITE #221
ORLANDO, FL 32837

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

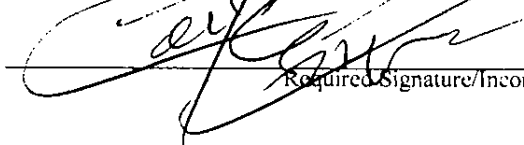


Required Signature/Registered Agent

08/29/2014

Date

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.



Required Signature/Incorporator

08/29/2014

Date

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RECEIVED
STATE DEPT
TALLAHASSEE