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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to		
W16-254	22	

Office Use Only



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S. PRATHER



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 6, 2016

ADAM MAC 2720A N. ROOSEVELT BLVD WINN DIXIE PLAZA KEY WEST, FL 33040

SUBJECT: EQTRON INC. Ref. Number: W16000025422

We have received your document for EQTRON INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The attached form must be completed in order to file the document.

The registered agent must sign accepting the designation.

You must list at least one incorporator with a complete business street address.

Please return 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.

Stacy Prather Regulatory Specialist III

Letter Number: 716A00007032

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COVER LETTER

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

SUBJECT:	Egtron Inc.		
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	U <u>DE SUFFIX</u>)
Enclosed 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 o Status
		ADDITIONAL CO	PY REQUIRED
FROM:	Egtron She.	e (Printed or typed)	
_2	720A N. Rousevelt E	Blud WinW-DIXIE / Address	Plani
<u> </u>	Key West for City.	Porole 3304 State & Zip	10
✓	305 296 8		
<u> </u>		Telephone number a) hotmail.com	
	/ /	d for future annual report r	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: Eq. from Anc.	
ARTICLE II PRINCIPAL OFFICE Principal street address	Mailing address, if different is
2720 A N. Roosevelt Blue.	Walning address, it different tags
WINN-Dixie Phaza	25 S
Key West, Glorida 33040	
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	luce, Manket one sell poul
Equipment and related products, in any other lawful active as Corporate (for Parget) law of the	Justen to enguge
in any other lawful active as	authorized unclen the
Corporate (for Parket) law of the	Stale of Stenda
ARTICLE IV SHARES The number of shares of stock is: 600,000 Shares of Commun Stock, Class A, 400,000 Shares of Commun Stock, Class B,	Non-Voting Stock, & 0.01 PAR Value
PARTICIPATING.	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	
Name and Title: Adam Mac President	/ Name and Title:
Address 2720A N. Rocs evell Blief.	
Winni Divie Plana	nuuloss.
KenyWest, Hunda 33.	
Name and Title: FRANK WORMUTH DINEctory	Name and Title:
Address 1406 Petronia St Kly West Alorida 3300	40

Name and Title:	Name and Title:	
Address	Address:	
The state of the s		
ARTICLE VI REGISTERED AGENT		
The name and Florida street address (P.O. Bo	ox NOT acceptable) of the registered agent is:	
Name: Adam Mac		
Address: 2720 N. Row	SEVELT Blod WINN DIX, e Plag	u
Key West, Je	sevelt Blud. WINN Dixie Plaz. Ponka, 33040	
ARTICLE VII INCORPORATOR		and a sumb
ARTICLE IN INCOMI GRATOR		<u>ာ≥တ</u> တာ ြင်း ကား
The <u>name and address</u> of the Incorporator is:	/ /	
Name: FRANK W	2Rmuth	7
Address: 1406 Peta	PopiaSt.	TO R CO
KenWest	Florida 33040	<u> </u>
-1)		has all first to
ARTICLE VIII EFFECTIVE DATE:		
Effective date, if other than the date of filing: _ (If an effective date is listed, the date must be	pe specific and cannot be more than five business day	vs prior or 90 business
days after the filing.)	25 specific and calling 25 more called 25 more and 25 more called 25 more and 25 more called 25	
	of meet the applicable statutory filing requirements, this	date will not be listed as
the document's effective date on the Departme	int of State's records.	
Having been named as registered agent to acc	cept service of process for the above stated corporation	at the place designated in
this certificate, I am familiar with and accept t	he appointment as registered agent and agree to act in t	his capacity
1 / Mr ()		04/18/16
Required Sugnature/	Registered Agent	Date
I submit this document and affirm that the fa	acts stated herein are true. I am aware that the false in	nformation submitted in a
document to the Hepartment of State constitute	es a third degree felony as provided for in s.817.155, F.S	s.
fr (X/Alimental		4/18/2016
Required Signature/Incorporator		Date