## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H160002061573)))



H1600D2061573ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Division of Corporations
Fax Number : (850)617-6381

C: From:
Account Name : THE LAW OFFICES OF NICK SPRADLIN FALC
Account Number : 120070000020
Phone : (813)435-3176
Fax Number : (713)429-1276

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please \*\*\*

Email Address:

## FLORIDA PROFIT/NON PROFIT CORPORATION ELECTROMART OF USA 9699 II, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

1#

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

FILED

ARTICLE I NAME The name of the corporate	EL ion shall be:	ECTROMART OF USA 9699 II, INC.			2016 AUG 16 AM 11:		
ARTICLE II PRINC	IPAL OFFICE Principal street			Mailing	SLAND HARY	OF STAFE SFLORIDA	
873 Rock Creek Rd				873 Rock Creek		:	
Apopka FL 32712				Apopka FL 327	12	:	
ARTICLE III PURPO The purpose for which th	SE ne corporation	s organized is:	and all lawful	business'.		;	
						:	
ARTICLE IV SHARE The number of shares of share	L OFFICERS	<b>.</b>	<u>rs</u>				
Name and Title:	873 Rock Cre	<del></del>	Name Addr			<u> </u>	
	Apopka FL 32	712	Addr	———			
						:	
Name and Title:		· ·	Name	e and Title:			
Address		. ,	Addr	css:		:	
Name and Title:			Name	e and Title:		:	
Address			Addr	ess:		<u> </u>	
						· ·	

19 2016 1:	32PM	PPM NICK SPRADLIN		8133336358		
					FILED	
					2016 AUG 16 AM II	: [
					TALLAHASSEE, FLO	11
Name an	id Title:			Name and Title:	F)	RII
Address	· —			Address:	<del> </del>	
	_			<u> </u>		
		·-··		<u> </u>		
ARTICLE VI						
The name and F			P.O. Box NOT acceptable	) of the registered agent is	<b>s</b> :	
Name:	The Lav	v Offices O	f Nick Spradlin, PLLC	<del></del>		
Address:	2202 N.	WEST SH	ORE BLVD. #200			
	TAMPA	., FL 33607				
ARTICLE VII	INCORPO	DRATOR				
The name and a	ddress of th	e Incorpora	tor is:			
Name:	NICK	OLAS J. S	PRADLIN ESQ.			
Address:	220	2 N. WEST	SHORE BLVD. #200			
	TAN	1PA, FL 33	507			
OTET EVIU	EEDECT	uve nate				
Effective date, if	other than	the date of	filing:	(OPTIC	ONAL)	
(If an effective of days after the fi	tate is liste	d, the date	must be specific and can	not be more than five b	ousiness days prior or 90 bus	ine
			does not meet the applicate partment of State's record		ements, this date will not be lis	ted
Having been nar this certificate, i	med as regi am familig	istered agen r with and i	t to accept service of proc ccept the appointment as	ess for the above stated or registered agent and agri	corporation at the place design ee to act in this capacity	ati
	7./	,			08/10/2016	
	F	Required Sig	mature/Registered Agent		Date	
I submit this doe	nument and	affirm tha	t the facts stated herein a	re true. I am aware that	the false information submit	ted
aocument to the .	vepurimen 	i oj state ci	nstitutes a third degree fel	ony as provided for in s.		
Requi	Land Land	re/Incorpo	rator		08/10/2016	
Kedin	r en enguern	пенисогро	14:01		Date	