P19000005860

(Red	questor's Name)			
(Add	dress)			
(Add	dress)			
(Cit	y/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAłL		
(Bu	siness Entity Nar	me)		
(Document Number)				
Certified Copies	_ Certificate	s of Status		
Special Instructions to	Filing Officer:			
•				

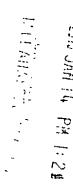
Office Use Only

JATIG 19



400323216774

01/14/19--01014--015 **70.00



1/7/2019

To Whom it may concern at the Florida Dept. of State:

MiMal Made

I am sending these Articles of Incorporation to establish the corporation listed below:

MCS USA Inc.

6926 Stone Rd.

Port Richey, Fl. 34668

Michael C. Slade, President

I am reclaiming the corporate name MCS USA Inc. which was previously established by me January 2014, with document # P14000004819, FEIN # 46-4593074, and deactivated in 2018. I will not be reactivating that document number, but want to retain the corporate name.

Please set me up as an active corporation immediately. If any problems or questions, please contact me with the information listed below.

Thank you,

Michael C. Slade, President

MCS USA Inc.

813 767 7340

mcslade@live.com -

COVER LETTER

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

SUDJECT,	5 USA In	- ,
(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an original and one (1) copy of the art	icles of incorporation and	d a check for:
\$70.00 \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM: Michael C. Slade Name	MICHA4C (. (Printed or typed)	SLADE
6926 STONE	Rddress	
PORT RICHAY	FL. 3466 State & Zip	8
813-767 - Daytime T		
mcslade @	k .	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 sh	all be:	MCS 1	JG4 1	NC.	
ARTICLE II PRINCIPAL Princ	OFFICE ipal street address		Ma	ailing address, if differ	ent is:
6926 STON	9 RD. Y, FL, 34668				
PORT RICHG	Y, FL. 34668	-			
ARTICLE III PURPOSE The purpose for which the cor	poration is organized is:	5AL94 +	- PROF	IT OF ALL	TYPS
			_		
ARTICLE IV SHARES The number of shares of stock	,			ALL Masser	2019 JAN 14
	FICERS AND/OR DIRECTO	_ ^		•	
Name and Title: VV	126 STONG RD				2
	MT KICHY, FL.		ess:		
	<u> </u>		_	-	
Name and Title:		Name	and Title:_		
			_		
Name and Title:		Name	and Title:		
				-	
			_		

Name and Title:	Name and Title:	
Address	Address:	
ARTICLE VI REGISTERED AGENT		
Name: MICHAGL (O. Box NOT acceptable) of the registered agent is:	
	NE RO.	
	44 FL. 34668	
ARTICLE VII INCORPORATOR		
The <u>name and address</u> of the Incorporator		
Name: MICHAGL	(. 5LADE	
Address: 6926 4T	0rg RD.	
	1CH47, FL. 34668	
ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of fill (If an effective date is listed, the date m filing.)	ing: 17 2019 (OPTIONAL ust be specific and cannot be more than five days p	.) orior or 90 days after the
<u>Note:</u> If the date inserted in this block do the document's effective date on the Department.	bes not meet the applicable statutory filing requirement artment of State's records.	ts, this date will not be listed as
this certificate, I am familiar with and acc	to accept service of process for the above stated corporept the appointment as registered agent and agree to a stated corporept the above stated corporept t	ration at the place designated in act in this capacity Date
I submit this document and affirm that the document to the Department of State constitution (Required Signature/Incorporate	the facts stated herein are true. I am aware that the j stitutes a third degree felony as provided for in s.817.1.	false information submitted in a 55, F.S. Daje