

P19000056045

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

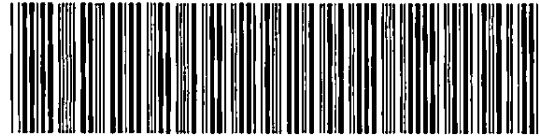
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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19 JUL 18 PM 1:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: MELEX TECHNOLOGIES INC

(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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: MELISSA EHRENTHAL

Name (Printed or typed)

9551 BARLETTA WINDS PT

Address

DELRAY BEACH, FL 33446

City, State & Zip

617-744-9790

Daytime Telephone number

aehrental@yahoo.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: MELEX TECHNOLOGIES INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

9551 BARLETTA WINDS PT

DELRAY BEACH, FL 33446

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Technology Consulting Business

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TALLAHASSEE, FLORIDA

ARTICLE IV SHARES

The number of shares of stock is: 10,000,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MELISSA EHRENTAL CEO

Name and Title: ALEX EHRENTAL CIO

Address 9551 BARLETTA WINDS PT
DELRAY BEACH, FL 33446

Address: 9551 BARLETTA WINDS PT
DELRAY BEACH, FL 33446

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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: MELISSA EHRENTAL

Address: 9551 BARLETTA WINDS PT

DELRAY BEACH, FL 33446

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: MELISSA EHRENTAL

Address: 9551 BARLETTA WINDS PT

DELRAY BEACH, FL 33446

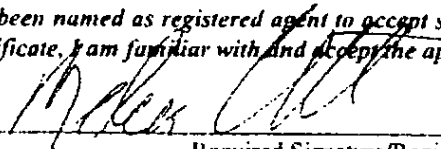
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

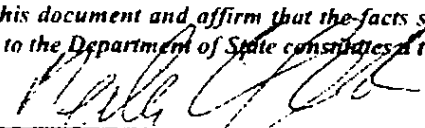
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

7-18-2019
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

7-18-2019
Date