8/1/2019

Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

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

Email Address:\_\_\_\_\_

## DOMESTICATION PORT ELECTRIC SUPPLY CORP.

	أعا فقاعتها والألواء والمساوي والمتحدد والمتحدد والمتحدد والمتحدد
Certificate of Status	0
Certified Copy	0 ;
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## Please keep file date 8/1/2019

Electronic Filing Menu Corporate Filing Menu

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(a)

https://efile.sunbiz.org/scripts/efilcovr.exe

1115 0 7 2019

The undersioned	CERTIFICATE OF DOM  C. HANK BARNES  (Name)		PEDRUT
The undersigned,	(Name)	(Title)	
of Port Electric	Supply Corp.	a fore	ign corporation;
	(Corporation Name) th s. 607.1801, Florida Statutes, does her	eby certify:	
1. The date on v	which corporation was first formed was _	JANUARY 24	. 1985
•	on where the above named corporation ving was Jersey	vas first formed, incorporat	ed, or otherwise
	the corporation immediately prior to the ectric Supply Corp.	filing of this Certificate of	Domestication
	the corporation, as set forth in its articles and 607.0401 with this certificate is Port	•	*
administratio	on that constituted the seat, siege social, n of the corporation, or any other equival before the filing of the Certificate of Dor	lent jurisdiction under appli	
6. Attached are to s. 607.180	Florida articles of incorporation to comp	lete the domestication requ	irements pursuan
I am CEO / PR	FEDOL, of Port Electric Supply C	Corp.	
	d to sign this Certificate of Domestication	on on behalf of the corporat	
so this the 31.	day of JULY	ature)	2019

Filing Fee:

Certificate of Domestication \$ 50.00
Articles of Incorporation and Certified Copy \$ 78.75
Total to domesticate and file \$128.75

## To.

## ARTICLES OF INCORPORATION

IN COMPLIANCE WITH CHAPTER 607, F.S.

THE NAME OF THE CORPORATION SHALL BE:	•
Port Electric Supply Corp.	
ARTICLE II PRINCIPAL OFFICE THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDRESS IS: Principal Address  1904 CAWMET STREET  (LEARWATER, FL. 33765	Mailing Address 1904 CAWMER STREET CLEARWATER, FL 33765
ARTICLE III PURPOSE THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED  TO ENGAGE IN ANY ACTOVERY WITH	_
PURPONES FOR WHICH CORPORDITIONS	
THE STATE OF FLOWER CORPORATION	
	· · · · · · · · · · · · · · · · · · ·

ARTICLE IV SHARES THE NUMBER OF SHARES OF STOCK IS: 2100		
ARTICLE V INITIAL DIRECTORS AND/O THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES: Title/Name		
CÉO PRESIDENT: C. HANK BARNES		
V. P. / Skiy; JONATHON D. BARNES	Title/Name	
Title/Name	Title/Name	
	· · · · · · · · · · · · · · · · · · ·	
Title/Name	Title/Name	

ARTICLE VI INITIAL REGISTERED AGENT A THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX NOT ACCES	
JONAMEN D. BARNES	
2096 HIDDEN LAKE DROVE	
PAYM HARBAR, FL 34683	
ARTICLE VII INCORPORATOR  THE NAME AND ADDRESS OF THE INCORPORATOR IS:	
C. HANK BARNES	
4333 WORTHWOTON CIRCLE	
PAM HARBON, FL. 34685	
***************************************	***
HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS	CERTIFICATE, I AM FAMILIAR WITH AN
ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGE	REE TO ACT IN THIS CAPACITY.  7/31/2019
Signature/Registered Agent	Date