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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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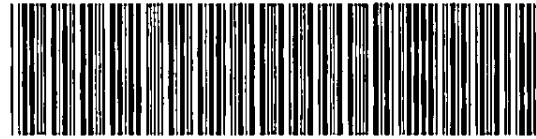
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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MAY 18 2020

COVER LETTER

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

SUBJECT: Electro Mecanic Garcia 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: Electro Mecanic Garcia Inc.

Name (Printed or typed)

1410 Juddale St E

Address

Lehigh Acres FL 33936

City, State & Zip

239-321-2837

Daytime Telephone number

carmenfortmyers@aol.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: Electro Mecanic Garcia Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1410 Juddale St E

Lehigh Acres Fl 33936

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The Genral natural of the business to be transected by this

Corporation is any and all business permitted under the laws of the State of Floirda

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Hilario Garcia Luevano / President

Name and Title: _____

Address 1410 Juddale St E

Address: _____

Lehigh Acres Fl 33936

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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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: Hilario Garcia Luevano

Address: 1410 Juddale St E

Lehigh Acres FL 33936

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Ricardo Rosale

Address: 26891 Old Us 41

Bonita Springs, FL 34135

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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

05-05-20
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

05-04-20
Date