PZ10000 35983

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
☐ PaC ← JP ☐ WAIT ☐ MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





300364597223

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 04/21/2021	-		
			WALK IN
ENTITY NAME_TEC E	ELECTRICAL, INC.		
DOCUMENT NUMBER_		-	
	PLEASE FILE THE AT	TTACHED AND RETURN	
XXXX	Plain Copy		TO VERZIK UNDE
	Certified Copy		
	Certificate of Status		
	Certified Copy of Arts & 1 Certificate of Good Standing	Amendments	***
	APOSTILLE' / NOTA	ARIAL CERTIFICATION	
COUNTRY OF DESTINAT	70N		
NUMBER OF CERTIFICA	TES REQUESTED		
TOTAL OWED \$70.00		ACCOUNT #: I2016000	0072
		- 1	
DA AAT.	, , , , ,	issues or concerns. Thank y	

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

TICLE 1 NAME of the corpor TICLE II PRIN					
	Principal street address	Mail	Mailing address, if different is		
8 Brecknock Ct.					
wtown, PA 18940					
TICLE III PURI	the corporation is organized is:	li lawful business.			
			·	202	
			Ĭ.	<u> </u>	
TICLE IV SILAI number of shares o	<u>RES</u> 1.000 f stock is:			2 AH	
number of shares o	f stock is:		;	21 1411:27	
number of shares o	f stock is:	Name and Title:	;	1 AHII: 27	
number of shares o	f stock is:		:	1 AHII: 27	
number of shares of shares of shares of shares of the share and Tit	f stock is:	Name and Title:	:	1 AHII: 27	
number of shares	AL OFFICERS AND/OR DIRECTORS Brian Allen Turner - D, P, VP, S, T 58 Brecknock Ct. Newtown, PA 18940	Name and Title: Address:		A411: 27	
number of shares of FICLE V INITI Name and Tit Address Name and Title	AL OFFICERS AND/OR DIRECTORS Brian Allen Turner - D, P, VP, S, T 58 Brecknock Ct. Newtown, PA 18940	Name and Title: Address: Name and Title:		A411: 27	
number of shares	AL OFFICERS AND/OR DIRECTORS Brian Allen Turner - D, P, VP, S, T 58 Brecknock Ct. Newtown, PA 18940	Name and Title: Address: Name and Title: Address:		A/411: 27	
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Name a	ind Title:	Name and Title:	
Addre	ss	Address:	
ARTICLE VI The name and	<u>REGISTERED AGENT</u> <u>Horida street address</u> (P.O. Box NO T acceptable) of	the registered agent is:	
Name:	MyCompanyWorks, Inc.		
Address:	625 E. Twiggs St., Ste. 1000	· •	
	Тапіра. FL 33602	· -	
<u>ARTICLE VII</u>	<u>INCORPORATOR</u>		
The name and	uddress of the Incorporator is:		
Name.	Ed Tsuji		
Address	187 E. Warm Springs Rd., Ste. B		
	Las Vegas, NV 89119	•	
Effective date, i	EFFECTIVE DATE: f other than the date of filing: date is listed, the date must be specific and cannot	. (OPTIONAL) the more than five days prior or 90 days :	after the
Note: If the dat	e inserted in this block does not meet the applicable seffective date on the Department of State's records.	statutory filing requirements, this date will no	ot be listed as
Having been na this certificate, i	med as registered agent to accept service of process am familiar with and accept the appointment as reg	for the above stated corporation at the placistered agent and agree to act in this capacity	e designated in v
W.	Matthew Knee, President of MyComj	panyWorks, Inc. 04/20/2021	
	Required Signature/Registered Agent	Da	ite
l submit this do document to the	cument and affirm that the facts stated herein are t Department of State constitutes a third degree felony	vas provided for in s.817.155. F.S.	
	Q) M	04/20/2021	iffer tim
Reyi	aired Signature/Incorporator		Date