

FLORIDA Department of State
Division of Corporations
Electronic Filing Cover Sheet
H23000408468

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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : CITI TAXES LLC
Account Number : I20230000131
Phone : (305)803-4427
Fax Number : (305)402-6230

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

Email Address: citi.taxes@yahoo.com

**FLORIDA PROFIT/NON PROFIT CORPORATION
ELECTRICITY PARTS ORLANDO, CORP**

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$78.75

T.J.H.
11/30/23

Electronic Filing Menu

Corporate Filing Menu

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COVER LETTER

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

SUBJECT: ELECTRICITY PARTS ORLANDO, CORP**(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 REQUIREDFROM: **CITI TAXES LLC**

Name (Printed or typed)

5721 NW 112TH AVE APT 108

Address

DORAL, FL 33178

City, State & Zip

305-803-4427

Daytime Telephone number

CITI.TAXES@YAHOO.COM

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

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2023 NOV 29 PM 1:02

FEB 20 2024

ARTICLES OF INCORPORATION

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

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ARTICLE I NAMEThe name of the corporation shall be: ELECTRICITY PARTS ORLANDO, CORPARTICLE II PRINCIPAL OFFICE

Principal street address

11562 WESTWOOD BLVD APT 918
ORLANDO, FL 32821

Mailing address, if different is:

11562 WESTWOOD BLVD APT 918
ORLANDO, FL 32821ARTICLE III PURPOSEThe purpose for which the corporation is organized is: ALL AND ANY LAWFUL BUSINESSEIN # 93-4617037ARTICLE IV SHARESThe number of shares of stock is: 100ARTICLE V INITIAL OFFICERS AND/OR DIRECTORSName and Title: DANIEL ALEJANDRO LARA D APICE- PRESIDENT Name and Title: _____Address: 11562 WESTWOOD BLVD APT 918 Address: _____
ORLANDO, FL 32821

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 AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: DANIEL ALEJANDRO LARA D APICE
Address: 11562 WESTWOOD BLVD APT 918
ORLANDO, FL 32821

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: DANIEL ALEJANDRO LARA D APICE
Address: 11562 WESTWOOD BLVD APT 918
ORLANDO, FL 32821

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

D. Apice 11/29/2023
Required Signature/Registered Agent 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.

D. Apice 11/29/2023
Required Signature/Incorporator Date

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