

Florida Department of State
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 : (614)573-3996

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

Email Address: cfb@hvaconmarine.com

FLORIDA PROFIT/NON PROFIT CORPORATION
HVACON Marine Systems, Inc.

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 03 |
| Estimated Charge | \$70.00 |

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: HVACON Marine Systems, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

1319 Avocado Isle

Fort Lauderdale, FL 33315

Mailing address, if different is:

1319 Avocado Isle

Fort Lauderdale, FL 33315

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Supply and installation of HVAC energy saving technologies. Any and all lawful business.

FILED
2024 NOV 26 PM 4:00
SECRETARY OF STATE
TALLAHASSEE, FL

ARTICLE IV SHARES

The number of shares of stock is: 100,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Douglas Frongillo, Officer

Address 1319 Avocado Isle, Fort
Lauderdale, FL 33315

Name and Title: Hans Ottosen, Director

Address: Tuborg Havnepark 21, 2. th.
2900 Hellerup Denmark

Name and Title: Claes Fog Bølge, Director

Address 1319 Avocado Isle, Fort
Lauderdale, FL 33315

Name and Title: Henrik Normann, Director

Address: Dreyersvej 13, 2960
Rungsted Kyst, Denmark

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: C T Corporation System

Address: 1200 South Pine Island Road

Plantation, FL 33324

ARTICLE VII INCORPORATOR

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

Name: Leslie A. Brault

Address: c/o DLA Piper LLP (US)
2525 E. Camelback Rd., Ste 1000
Phoenix, AZ 85016

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TALLAHASSEE, FL

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

11/26/2024
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.

/s/ Leslie A. Brault

Required Signature/Incorporator

11/26/2024
Date