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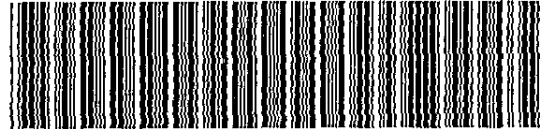
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C.S. 12-1

COVER LETTER

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

SUBJECT: Seige 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

Filing Fee

☒ \$78.75

Filing Fee
& Certificate of Status

☐ \$78.75

Filing Fee
& Certified Copy

☐ \$87.50

Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Edward Cifuentes
Name (Printed or typed)

8649 NW 50th Drive
Address

Coral Springs FL 33067
City, State & Zip

954-696-3717
Daytime Telephone number

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:

Seige Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

*10945 SW 16th Street Apt. 105
Pembroke Pines, FL 33025*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

manufacture and retail of customized apparel (clothing)

ARTICLE IV SHARES

The number of shares of stock is:

100 common stock

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

*Directors: Oscar Cifuentes Jr. 10945 SW 16th St. Apt. 105 Pembroke Pines, FL 33025
Anwar Khan 10945 SW 16th St. Apt. 105 Pembroke Pines, FL 33025*

*President: Oscar Cifuentes Jr. 10945 SW 16th St. Apt. 105 Pembroke Pines, FL 33025
Vice-President: Anwar Khan 10945 SW 16th St. Apt. 105 Pembroke Pines, FL 33025
Treasurer: Oscar Cifuentes Jr. 1095 16th St. Apt. 105 Pembroke Pines, FL 33025*

ARTICLE VI REGISTERED AGENT

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

Edward Cifuentes 8649 NW 50th Dr. Coral Springs, FL 33067

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Edward Cifuentes 8649 NW 50th Dr. Coral Springs, FL 33067

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

[Signature]

Signature/Registered Agent

11/23/05

Date

[Signature]

Signature/Incorporator

11/23/05

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA