

PO7000051777

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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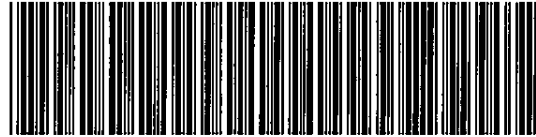
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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07 APR 27 PM 4:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4/30/07

COVER LETTER

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

FILED

07 APR 27 PM 4:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: SHIELD INVESTMENT GROUP, 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

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

ADDITIONAL COPY REQUIRED

FROM: KURRAY J COHEN PA

Name (Printed or typed)

10330 CAMELBACK LANE

Address

BOCA RATON, FL 33498

City, State & Zip

561-482-8682

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:

SHIELD INVESTMENT GROUP, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

75 N.E. 6 AVENUE
SUITE 105
DELRAY BEACH, FL. 33483

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ALL LEGAL INVESTMENTS

ARTICLE IV SHARES

The number of shares of stock is:

100 SHS

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

FRANK X CID PRES.
7897 NW 62 TERRACE
PARKLAND, FL. 33067

TIMOTHY G GRESGE SECY
2519 N OCEAN BLVD
BOCA RATON, FL 33431

ARTICLE VI REGISTERED AGENT

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

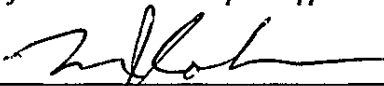
MURRAY J COHEN PA
10330 CAMELBACK LANE
BOCA RATON, FL 33498

ARTICLE VII INCORPORATOR

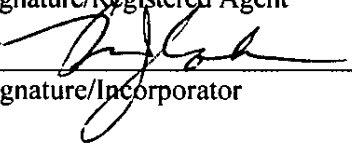
The name and address of the Incorporator is:

MURRAY J COHEN
10330 CAMELBACK LANE
BOCA RATON, FL. 33498

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/Registered Agent



Signature/Incorporator

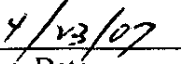
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TALLAHASSEE, FLORIDA



Date



Date