## P230000763/1

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

Office Use Only



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## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 - Tallahassee, Florida 32301 (850) 224-8870 - 1-800-342-8062 - Fax (850) 222-1222

Sibacq SUV Corp.					
	. 70				
Please Debit FCA00	00000003 For: 70				
Thank you Seth Nee	eley				
Stal			Art of Inc. File		
			LTD Partnership File		
,			Foreign Corp. File		
			L.C. File		
			Fictitious Name File		
			Trade/Service Mark		
			Merger File		
			Art, of Amend, File		
			RA Resignation		
			Dissolution / Withdrawal		
			Annual Report / Reinstatement		
			Cen. Copy		
			Photo Copy		
		_	Certificate of Good Standing		
			Certificate of Status		
			Certificate of Fictitious Name		
			Corp Record Search		
1.			Officer Search		
A	7/		Fictitious Search		
Signature			Fictitious Owner Search		
		<u> </u>	Vehicle Search		
			Driving Record		
Requested by: SETH		_	UCC t or 3 File		
Name	Date 7		UCC 11 Search		
		<u> </u>	UCC    Retrieval		
Walk-In	Will Pick Up _		Courier		

## **COVER LETTER**

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

SUBJECT: Sibacq SUV Corp. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) Enclosed are an original and one (1) copy of the articles of incorporation and a check for: \$78.75 \$87.50 Filing Fee Jeiling Fee Filing Fee Filing Fee, & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED FROM: Bared & Associates, P.A. Name (Printed or typed) 201 Alhambra Circle, Suite 501 Coral Gables, FL 33134 City, State & Zip <u>305-666-6010</u> Daytime Telephone number mimi@baredlaw.com
E-mail address: (to be used for future annual report notification)

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)

The name of the corpo			
<u>179</u> Uni	RINCIPAL OFFICE Principal street address 001 Collins Avenue t.603 ny Isles Beach, FL 33160	-	Mailing address, if different is:
Any and all law	h the corporation is organized is: ful business.		9: 11. 6: 5: 5: 5: 5: 5: 5: 5: 5: 5: 5: 5: 5: 5:
The number of shares	<del></del>		<u>ယ</u> . ပ
Name and Title Address:	TITIAL OFFICERS AND/OR DIRECTOR Abraham Achar Rajwan, Director 17901 Collins Avenue Unit 603 Sunny Isles Beach, EL 33160	Name and Title Address:	Letty Zetune Farca, Director 17901 Collins Avenue Unit 603 Sunny Isles Beach, FL 33160
Name and Title Address:		Name and Title Address:	
Name and Title Address:			:
ARTICLE VI RI	EGISTERED AGENT	_	
	a street address (P.O. Box NOT acceptable) of Pablo R. Bared, Esq. 201 Alhambra Circle, Suite 501 Coral Gables, FL 33134	-	nt is:
The <u>name and address</u> Name: Address:	CORPORATOR  So of the Incorporator is:  Pablo R. Bared, Esq.  201 Alhambra Circle, Suite 501  Coral Gables, FL 33134	=	stad comparation at the phase decision and i
	as registered agent to accept service of proces, uniliar with and accept the appointment as reg		
Pablo R. Bared			10/27/2023
	Required Signature/Registered Agent nt und affirm that the facts stated herein are		
document to the Depa	rtment of State constitutes a third degree felon Pablo R. Bared		
	Required Signature/Incorporator		Date