

PIS 000067272

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

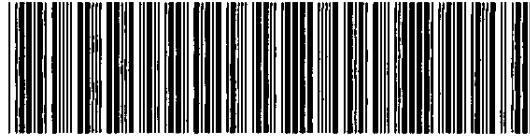
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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07/14/15--01015--020 **78.75

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2015 AUG - 6 PM 3:35

SECRETARY OF STATE
OFFICE OF CLERK OF COURT

~~6725000067272~~

KWS
8/11/15

COVER LETTER

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

SUBJECT: SINTEQ5, 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: STEFANO FALBO

Name (Printed or typed)

5151 Collins Avenue, Suite 932

Address

Miami Beach, Fl. 33140

City, State & Zip

305-867-9539

Daytime Telephone number

kfalbo@atlanticbb.net

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

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 22, 2015

STEFANO FALBO
5151 COLLINS AVENUE
SUITE 932
MIAMI BEACH, FL 33140

SUBJECT: SINTEQ5, INC.
Ref. Number: W15000049066

We have received your document for SINTEQ5, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The person designated as registered agent in the document and the person signing as registered agent must be the same.

The person designated as incorporator in the document and the person signing as incorporator must be the same.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Carol Mustain
Regulatory Specialist II

Letter Number: 315A00015336

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: SINTEQ5, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

5151 Collins Avenue, suite 932

Miami Beach, Fl. 33140

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to engage in any and all lawful business or activity permitted under the laws of the United States and the State of Florida.

To generally have and exercise all powers, rights and privileges necessary and incident to carrying out properly the objects herein mentioned.

ARTICLE IV SHARES

The number of shares of stock is: 1,000.00 c. stocks with 0.10 par value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Antonella Fungo Falbo - DPS

Name and Title: _____

Address 5151 Collins Avenue, 932

Address: _____

Miami Beach, Fl. 33140

Name and Title: Stefano Falbo - DVT

Name and Title: _____

Address 5151 Collins Avenue, 932

Address: _____

Miami Beach, Fl. 33140

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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CLERK OF STATE
TALLAHASSEE, FLORIDA

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: STEFANO FALBO _____

Address: 5151 Collins Avenue, Suite 932 _____

Miami Beach, Fl. 33140 _____

ARTICLE VII INCORPORATOR

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

Name: STEFANO FALBO _____

Address: 5151 Collins Avenue, Suite 932 _____

Miami Beach, Fl. 33140 _____

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 business days prior or 90 business 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

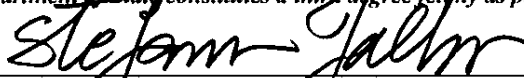


Required Signature/Registered Agent

July 29, 2015

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.



Required Signature/Incorporator

July 29, 2015

Date