

PO2000112998
TRANSMITTAL LETTER

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

200008469882--6
-10/21/02--01017--001
*****70.00 *****70.00

SUBJECT: Sylvia & Associates Inc.
(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☒ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Craig C. Sylvia
Name (Printed or typed)

1054 NE 44th Place
Address

Fort Lauderdale FL 33334
City, State & Zip

(754)234-8281
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02 OCT 21 PM 1:02

FILED

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

me 10/21

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

FILED
02 OCT 21 PM 1:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Sylvia S Associates Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

1054 NE 44th Place
Fort Laud FL 33334

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

ten

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

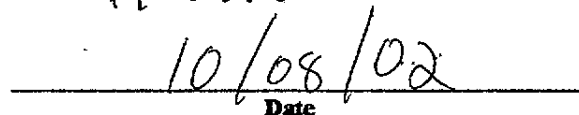
Craig Cory Sylvia
1054 NE 44th Pkce
Ft Laud FL 33334

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Craig Cory Sylvia
1054 NE 44th pke
Ft Laud FL 33334

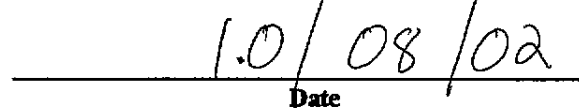

Signature/Incorporator


Date

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent


Signature/Registered Agent


Date