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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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(Business Entity Name)

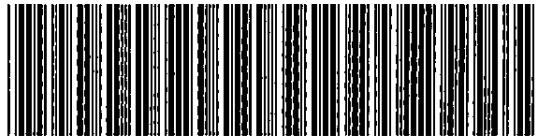
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06 JUN -5 PM 1:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

COVER LETTER

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

SUBJECT: SIVINA ENTERPRISES, 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: Rhonda A. Anderson, Esq.

Name (Printed or typed)

2701 S. LeJeune Road, Suite 345

Address

Coral Gables, Florida 33134

City, State & Zip

305-567-3004

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)

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06 JUN -5 PM 1:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

SIVINA ENTERPRISES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

2701 S. LeJeune Road, Suite 345, Coral Gables, Florida 33134

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The general nature of business of this corporation is to transact any and all lawful business.

ARTICLE IV SHARES

The number of shares of stock is:

The aggregate number of shares which this corporation shall have authority to issue are 100 shares having an individual par value of \$10.00. Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

The name and address of the initial board of directors shall be:

Mitchell Sivina, President

Mitchell Sivina, Vice President

Mitchell Sivina, Secretary Treasurer

2701 S. LeJeune Road, Suite 345

Coral Gables, Florida 33134

ARTICLE VI REGISTERED AGENT

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

Rhonda A. Anderson, Esq.

2701 S. LeJeune Road, Suite 345, Coral Gables, Florida 33134

ARTICLE VII INCORPORATOR

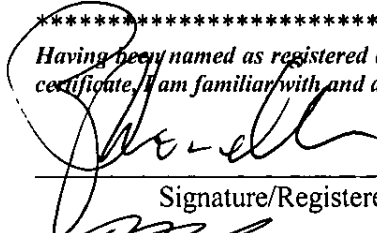
The name and address of the Incorporator is:

Mitchell Sivina

2701 S. LeJeune Road, Suite 345

Coral Gables, Florida 33134

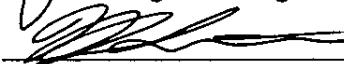
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

6/2/06

Date



Signature/Incorporator

6/2/06

Date