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|---|------|
| (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: | .] |
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Office Use Only



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COVER LETTER

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

| P. O. Box 6327 Tallahassee, FL 32314 | | , ", . |
|--|--|---|
| SUBJECT: Siana Import Group Inc | ;. RATE NAME – <u>MUST INCL</u> | UDE SUFFIX) |
| Enclosed are an original and one (1) copy of the | articles of incorporation and | l a check for: |
| ☐ \$70.00 | \$78.75 Filing Fee & Certified Copy ADDITIONAL CO | \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED |
| FROM: Bartholomew Phillips | | |
| | me (Printed or typed) | |
| 600 Old Sanford Ovid | edo Rd Address | |
| Winter Springs, FI 327 | 708 ity, State & Zip | |
| 407-414-4192 | | |
| Daytim | ne 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:

Siana Import Group Inc.

FILED

06 NOV 27 PM 12: 00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

600 Old Sanford Oviedo Rd Winter Springs, FI 32708

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Wholesale business products

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Bartholomew Phillips 600 Old Sanford Oviedo Rd Winter Springs, Fl 32708 president Alexander Phillips 3 Vetri Rd Goshen, NY 10924 vice president

ARTICLE VI REGISTERED AGENT

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

**Bartholomew Phillips

. 600 Old Sanford Oviedo Rd

Winter Springs, FI 32708

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Bartholomew Phillips

600 Old Sanford Oviedo Rd

Winter Springs, FI 32708

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

Date

Date