

P19000017313

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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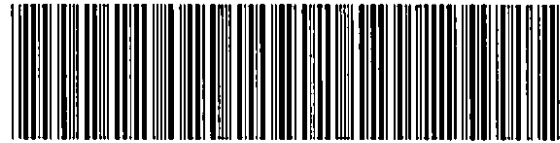
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: SIAL Healthcare International 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: N.E.L. AND TRUST LLC.

Name (Printed or typed)

5077-109 FRUITVILLE RD, STE 133

Address

SARASOTA, FL 34232

City, State & Zip

941-404-8201

Daytime Telephone number

neltrustsrq@gmail.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)

ARTICLE I NAME

The name of the corporation shall be: SIAL Healthcare International Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

3201 N. Tamiami Trail

Sarasota, FL 34234

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS.

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Wolfgang WEIDINGER, P. D. Treasurer

Address: 3201 N. Tamiami Trail

Sarasota, FL 34234

Name and Title: R&D Investment Trust Inc. VP

Address: 3201 N. Tamiami Trail

Sarasota, FL 34234

Name and Title: Aleksandr Filipitskiy, Secretary

Address: 3201 N. Tamiami Trail

Sarasota, FL 34234

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

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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: N.E.L. AND TRUST LLC.

Address: 5077-109 Fruitville Rd, Ste 133

Sarasota, FL 34232

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Aleksandr Filipitskiy

Address: 3201 N. Tamiami Trail

Sarasota, FL 34234

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 02/25/2019 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 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

V. Tain

Required Signature/Registered Agent

02/26/19

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.

A. Philip

Required Signature/Incorporator

02/26/19

Date

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