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## COVER LETTER

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

SUBJECT: SH	W DE	SIGN GROUP, INC.	ore MARKE SHICK INCOME	INC CHECKY	
		(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u> I	)DF, SUFFIX	
Enclosed are an	origi	nal and one (1) copy of the ar	ticles of incorporation and	a check for:	
S70.0 Filing Fe		□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
			ADDITIONAL CO	- REQUIRED	
. FROM	Shai :	ron E. Wagner	e (Printed or typed)		
16		1627 Eastlake Way			
			Address		
	Wes	ton, FL 33326			
		City	. State & Zip		
	954-	817-8668			
		Daytime 1	Felephone number		
	share	on@shwdesigngroup.com			
		E-mail address: (to be use	ed for future annual report i	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)

<u>TLE II — PRINC</u>	<u>TPAL OFFICE</u> Principal <u>street</u> address	Mailing ac	Mailing address, if different is:	
Eastlake Way				
on, FL 33026				
CLE III PURPO	<u>OSE</u> he corporation is organized is:	ide Web design services		
<u> </u>		<u>-</u> -		
		· · · · · · · · · · · · · · · · · · ·		
	<del></del>	<del>_</del>		
	stock is:			
amber of shares of CLE V INITE  Name and Titl	stock is:  AL OFFICERS AND/OR DIRECTO  E:  1627 Fastlake Way	Name and Title:	2: 3	
imber of shares of	stock is:  AL OFFICERS AND/OR DIRECTO  E:  1627 Fastlake Way	<u>PRS</u>	2010	
amber of shares of CLE V INITE  Name and Titl	stock is:  AL OFFICERS AND/OR DIRECTO  E:  1627 Eastlake Way	Name and Title:		
amber of shares of CLE V INITE  Name and Titl  Address	stock is:  AL OFFICERS AND/OR DIRECTO  E:  1627 Eastlake Way  Weston, FL 33326	Name and Title:Address:	9.	
CLE V INITE  Name and Titl  Address  Name and Title	Sharon E. Wagner, P. D  1627 Eastlake Way  Weston, Fl. 33326  Michael Wagner, VP, D	Name and Title:  Address:  Name and Title:	99. 33	
amber of shares of CLE V INITE  Name and Titl  Address	stock is:  AL OFFICERS AND/OR DIRECTO e: Sharon E. Wagner, P. D  1627 Eastlake Way  Weston, FL 33326  Michael Wagner, VP, D	Name and Title:Address:Name and Title:Name and Title:Name and Title:	9.	
CLE V INITE  Name and Titl  Address  Name and Title	Sharon E. Wagner, P. D  1627 Eastlake Way  Weston, FL 33326  Michael Wagner, VP, D  1627 Eastlake Way  Weston, FL 33326	Name and Title:	9: 33	
CLE V INITE  Name and Title  Address  Name and Title  Address	Sharon E. Wagner, P. D  1627 Eastlake Way  Weston, Fl. 33326  Michael Wagner, VP, D  1627 Eastlake Way  Weston, FL 33326	Name and Title:	9. 33	

Name a	and Title:	Name and Title:	
Addre	ss	Address:	
	- <del></del> -		
ARTICLE VI	REGISTERED AGENT		
	Florida street address (P.O. Box NOT acc	eptable) of the registered agent is:	
Name:	Sharon E. Wagner		
Address:	1627 Eastlake Way		
	Weston, FL 33326		
ADTICLE VII	INCORPORATOR		
The <u>name and</u>	address of the Incorporator is:		
Name:	Sharon E. Wagner		
Address:	1627 Eastlake Way		
	Weston, FL 33326		
ADTICLE MI	I_EFFECTIVE DATE:		
Effective date,	if other than the date of filing:	. (OPTIO	NAL)
filing.)	e date is fisted, the date most be specific	and cannot be more than five da	iys prior or 70 days after the
	nte inserted in this block does not meet the seffective date on the Department of State		
this certificate,	named as registered agent to accept service I am familiar with and accept the appoint	ment as registered agent and agre	
All	anon E Mar- Required Signature/Registered		6/24/2019
	Required Signature/Registered	Agent	Date
	locument and affirm that the facts stated we Pepartment of State constitutes a third a		
Sh	2.2. 8 11/		6/04/000
Rec	Quared Signature/Incorporator		6/21/2019 Date

## **COVER LETTER**

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

SUBJECT: SHV	W DESIGN GROUP, INC.		
SODJECT.	(PROPOSED CORPOR	ATE NAME – <u>MUST INCL</u>	JDE SUFFIX)
Enclosed are an	original and one (1) copy of the a	rticles of incorporation and	l a check for:
☐ \$70.0 Filing Fe	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of
		ADDITIONAL CO	PY REQUIRED
FROM:	Nar	me (Printed or typed)	
	1627 Eastlake Way	Address	
	Weston, FL 33326	. Hadi e.s.	
	Cit	y, State & Zip	
	954-817-8668		
	Daytime	Telephone number	-
	sharon@shwdesigngroup.com		
	E-mail address: (to be u	sed for future annual report	notification)

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