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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6381

From: Account Name : USACORP INC.
Account Number : I20130000019
Phone : (718)362-4789
Fax Number : (718)408-2550

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: ---icbexec31@yahoo.com

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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FLORIDA PROFIT/NON PROFIT CORPORATION
Sisbro Mechanical Consultant Inc.

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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: Sisbro Mechanical Consultant Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

10249 Spyglass Way

Boca Raton, FL 33498

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any Lawful Purpose

ARTICLE IV SHARES

The number of shares of stock is: 200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Michael A. Ferrugio, OFFICER

Name and Title: _____

Address 10249 Spyglass Way

Address: _____

Boca Raton, FL 33498

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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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: Michael A. Ferrugio
Address: 10249 Spyglass Way
Boca Raton, FL 33498

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Michael A. Ferrugio
Address: 10249 Spyglass Way
Boca Raton, FL 33498

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____. (OPTIONAL)

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

/s/ Michael A. Ferrugio	10/24/2019
_____ Required Signature/Registered Agent	_____ 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.

/s/ Michael A. Ferrugio	10/24/2019
_____ Required Signature/Incorporator	_____ Date

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