

**P19000093164**

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 617-6381

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.  
Account Number : 075350000353  
Phone : (800) 221-2972  
Fax Number : (718) 889-7420

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

Email Address: \_\_\_\_\_

**FLORIDA PROFIT/NON PROFIT CORPORATION**

**Siyanah Corporation**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

**FILED**  
2019 DEC 16 AM 11:45  
SECRETARY OF STATE  
TALLAHASSEE, FL

**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: Siyanah Corporation

**ARTICLE II PRINCIPAL OFFICE**

Principal ~~street~~ address  
1897 Palm Beach Lakes Blvd., Ste. 219

West Palm Beach, FL 33409

Mailing address, if different is:  
1897 Palm Beach Lakes Blvd., Ste. 219

West Palm Beach, FL 33409

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: to engage in any lawful act or activity for  
which corporations may be organized.

**ARTICLE IV SHARES**

The number of shares of stock is: 1,000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Solomon Tarik/PRESIDENT

Address: Al-Akkariya Bldg1-Set 407

Moussa Bin Nossair St.

Riyadh, Kingdom of Saudi Arabia 11553

Name and Title: Solomon Tarik/Director

Address: Al-Akkariya Bldg1-Set 407

Moussa Bin Nossair St.

Riyadh, Kingdom of Saudi Arabia 11553

Name and Title: Solomon Tarik/Secretary

Address: Al-Akkariya Bldg1-Set 407

Moussa Bin Nossair St.

Riyadh, Kingdom of Saudi Arabia 11553

Name and Title: Solomon Tarik/Treasurer

Address: Al-Akkariya Bldg1-Set 407

Moussa Bin Nossair St.

Riyadh, Kingdom of Saudi Arabia 11553

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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 GuyardAddress: 1897 Palm Beach Lakes Blvd., Ste. 219West Palm Beach, FL 33409**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:Name: Michael A. Lampert, Esq.Address: 1655 Palm Beach Lakes Blvd Ste 900West Palm Beach, FL 334012019 DEC 16 AM 11:45  
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**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*Michael Guyard *by Michael A. Lampert, Esq.* 12/16/19  
Required Signature/Registered Agent per envelope 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.*Michael A. Lampert, Esq. 12/16/19  
Required Signature/Incorporator Date