

P200 0000 1613

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
SISSY SOLUTION SERVICE INC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

RECEIVED
2020 JAN -8 PM 12:50
DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
REGISTRATION SERVICES

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:Sissy Solution Service Inc.**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

22843 SW 115th AveMiami, FL 33170**ARTICLE III SHARES:** The number of shares of stock is: 1000**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**Sissy Noda Soli (P)**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

The name and Florida street address (PO Box not acceptable) of the registered agent is:

SISSY NODA SOLI22843 SW 115 AVEMIAMI FL 33170**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:SISSY NODA SOLI22843 SW 115 AVEMIAMI FL 33170

2024-03-01 1:19

Required Signatures:

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



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.



Incorporator

Date

2020-01-08 12:39