

P20000052724

Florida Department of State
Division of Corporations
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

From: Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC
Account Number : 07535000353
Phone : (800)221-2972
Fax Number : (917)243-5843

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
SWAG CONSULTING, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

2020 JUL 13 PM 3:30

T. BURCH

JUL 20 2020

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME SWAG CONSULTING, INC.

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

3127 HEATHER GLEN CT

3127 HEATHER GLEN CT

NAPLES, FL 34114

NAPLES, FL 34114

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Consulting

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ARTICLE IV SHARES

The number of shares of stock is:

200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JOSEPH DE SENA - PRESIDENT Name and Title:

Address 3127 HEATHER GLEN CT Address:
NAPLES, FL 34114

Name and Title: Name and Title:

Address Address:

Name and Title: Name and Title:

Address Address:

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: JOSEPH DE SENA
 Address: 3127 HEATHER GLEN CT
NAPLES, FL 34114

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JOSEPH DE SENA
 Address: 3127 HEATHER GLEN CT
NAPLES, FL 34114

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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 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

(X) Joseph S. De Sena _____ 07/09/2020 _____
 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.

(X) Joseph S. De Sena _____ 07/09/2020 _____
 Required Signature/Incorporator Date