

6/17/2021

P210 0007 4228

Division of Corporations

# 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 : LICENSES ETC INC  
Account Number : I20070000159  
Phone : (239)777-1028  
Fax Number : (877)275-3593

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

Email Address: SUPPORT@LICENSESETC.COM

### FLORIDA PROFIT/NON PROFIT CORPORATION SI CONSTRUCTION GROUP INC

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Electronic Filing Menu

Corporate Filing Menu

Help

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AUG 1 2021

**COVER LETTER**

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

**SUBJECT:** SI CONSTRUCTION GROUP INC

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☐ \$78.75      ☒ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status

**ADDITIONAL COPY REQUIRED**

**FROM:** LISA ADAMS

Name (Printed or typed)

LICENSES, ETC., INC.

Address

27911 CROWN LAKE BLVD SUITE 211, BONITA SPRINGS, FL 34135

City, State & Zip

(239) 777-1028

Daytime Telephone number

SUPPORT@LICENSESETC.COM

E-mail address: (to be used for future annual report notification)

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

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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: SI CONSTRUCTION GROUP INC

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

19790 W. DIXIE HIGHWAY, UNIT 409  
MIAMI, FL 33180

19790 W. DIXIE HIGHWAY, UNIT 409  
MIAMI, FL 33180

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Any and all lawful business.

**ARTICLE IV SHARES**

The number of shares of stock is: 1000

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

Name and Title: SHAUL IBGVY, P Name and Title: \_\_\_\_\_

Address 19790 W. DIXIE HIGHWAY, UNIT 409 Address: \_\_\_\_\_  
MIAMI, FL 33180

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: SHAUL IBGVY

Address: 19790 W. DIXIE HIGHWAY, UNIT 409

MIAMI, FL 33180

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: SHAUL IBGVY

Address: 19790 W. DIXIE HIGHWAY, UNIT 409

MIAMI, FL 33180

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TALLAHASSEE, FLORIDA

**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*

SHAUL IBGVY

06/09/2021

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.*

SHAUL IBGVY

06/09/2021

Required Signature/Incorporator

Date

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