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H220001502723ABCV

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To:

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

From:

Account Name : GFS TAX & ACCOUNTING SERVICES
Account Number : I20140000089
Phone : (754)301-2128
Fax Number : (954)252-4650

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

Email Address: INFO@GFSTAXACCT.COM

**FLORIDA PROFIT/NON PROFIT CORPORATION
SENJU CONSTRUCTION CORP**

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

RECEIVED

2022 APR 26 AM 11:57

FLORIDA DEPARTMENT OF REVENUE
DIVISION OF CORPORATIONS
AND BUSINESS SERVICES

2022 APR 26 PM 7:32

ED

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4220001502723

COVER LETTER

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

SUBJECT: SENJU CONSTRUCTION CORP(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
Filing Fee☐ \$78.75
Filing Fee
& Certificate of Status☐ \$78.75
Filing Fee
& Certified Copy☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status**ADDITIONAL COPY REQUIRED****FROM:** JULIANA MACHADO, CPA

Name (Printed or typed)

1932 NW 54TH AVE

Address

MARGATE, FL 33063

City, State & Zip

754-301-2128

Daytime Telephone number

INFO@GFSTAXACCT.COM

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

FILED
2022 APR 26 PM 7:32
Tallahassee, Florida

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

H220001502723

ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: SENJU CONSTRUCTION CORP**ARTICLE II PRINCIPAL OFFICE**Principal street address1932 NW 54TH AVEMARGATE, FL 33063

Mailing address, if different is:

1932 NW 54TH AVEMARGATE, FL 33063**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: 1,000**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: DIOGO SERRANO - PRESIDENT

Name and Title: _____

Address 1932 NW 54TH AVE

Address: _____

MARGATE, FL 33063

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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2022 APR 26 PM 7:32
CLERK OF DISTRICT COURT
JULIANA DOS SANTOS

H220001502723

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: GPS TAX & ACCOUNTING SERVICES
Address: 11764 W SAMPLE RD STE 102
CORAL SPRINGS, FL 33067

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: GILVAM F DOS SANTOS
Address: 11764 W SAMPLE RD STE 102
CORAL SPRINGS, FL 33067


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.)

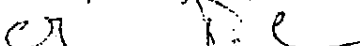
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.


Required Signature/Registered Agent

10/26/22
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.


Required Signature/Incorporator

10/26/22
Date