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Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:		三
	Division of Corporations	2年 第
	Fax Number : (850)617-6381	JAN 19 RETANY AHASSE
		<u>س</u> "
From:		PH 2: 02 F STATE FLORID
	Account Name : HUBCO	<u> </u>
	Account Number : 104662003400	
	Phone : (516)935-3940	DE 0.
	Fax Number : (516)935-3088	, >

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FLORIDA PROFIT/NON PROFIT CORPORATION

Sigma Consulting of FL Inc.

Certificate of Status	1
Certified Copy	0
Page Count	63
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF INCORPORATION

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

The name of the corpora	tion shall be: Sign	Sigma Consulting of FL Inc.	
ARTICLE II PRING 2417 Southern Links	CIPAL OFFICE Principal street address	Mailing address	if different is:
APTICI FILL PURPL		gal or Lawful Purpose	
			2022 J/ SECR
			N 19
	ES stock is: 200 at No Par Value		PM 2: 02 OF STATE E. FLORIDA
ARTICLE V INITL	<u>AL OFFICERS AND/OR DIRECTORS</u>		
Name and Titl Address	e: Eric Simonise - President/Director 2417 Southern Links Drive		
	Fleming Island, FL 32003		
Name and Title	::	Name and Title:	
Address		Address:	
Name and Title	::	Name and Title:	
Address		Address:	
			

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20,73771112	1710 10 17000		H22000016139
Name a	nd Title:	Name and Title:	
Addres	is	Address:	
	REGISTERED AGENT		
,	Florida street address (P.O. Box NOT accepta Eric Simonise	able) of the registered agent is:	1 2
Name: Address:	2417 Southern Links Drive		2022 JAN 19 SECRETARY TALLAHASSI
	Fleming Island, FL 32003		N 19 NASSE
ARTICLE VII	<u>INCORPORATOR</u>		JAN 19 PM 2: 02 ORETARY OF STATE AHASSEE, FLORIDA
The name and a	address of the Incorporator is:		AIE 02
Name:	Eric Simonise		>
Address:	2417 Southern Links Drive		
	Fleming Island, FL 32003		
Effective date, i	EFFECTIVE DATE: f other than the date of filing: date is listed, the date must be specific and	(OPTIONA cannot be more than five days	L) prior or 90 days after the
	te inserted in this block does not meet the app effective date on the Department of State's re		nts, this date will not be listed as
Having been na certificate, ham	med as registered agent to accept service of pr familiar with and accept the appointment as t	ocess for the above stated corpora registered agent and agree to act i	tion at the place designated in this n this capacity
1:11	emanisa		January 12, 2022
Required Signat	ure/Registered Agent	· · · · · · · · · · · · · · · · · · ·	Date
I submit this de	ocument and affirm that the facts stated here	in 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 \$.817.155, F.S.

Required Signature Incorporator

January 12, 2022 Date