

P11000079219

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

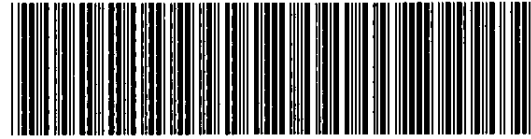
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08/15/11--01051--004 **78.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 SEP - 7 AM 10:48

9/8/11



FLORIDA DEPARTMENT OF STATE
Division of Corporations

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11 SEP -7 PM 4:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

August 30, 2011

HARVEY L. RUBINCHIK, ESQ.
1860 N PINE ISLAND RD #201
PLANTATION, FL 33322

SUBJECT: IVANTOP, I, INC.
Ref. Number: W11000042686

We have received your document for IVANTOP, I, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6901.

Pamela Smith
Regulatory Specialist II

Letter Number: 011A00020249



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DIVISION OF CORPORATIONS

FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 16, 2011

HARVEY L. RUBINCHIK, ESQ.
1860 N PINE ISLAND RD #201
PLANTATION, FL 33322

SUBJECT: IVANTOP, I, INC.
Ref. Number: W11000042686

We have received your document for IVANTOP, I, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Your document is being returned as requested.

We are enclosing the proper form(s) with instructions for your convenience.

If you have any further questions concerning your document, please call (850) 245-6901.

Pamela Smith
Regulatory Specialist II
New Filing Section

Letter Number: 411A00019153

COVER LETTER

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

SUBJECT: .IVANTOP, I, 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 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: Harvey L. Rubinchik, Esq.

Name (Printed or typed)

1860 N. Pine Island Road, Suite 201

Address

Plantation, FL 33322

City, State & Zip

(954) 475-9995

Daytime Telephone number

barristertitle@aol.com

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

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

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

ARTICLE I NAME IVANTOP, I, INC.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE
Principal street address
5072 NW 7TH STREET, BUILDING 2, APT. 1010
MIAMI, FL 33126

Mailing address, if different is:

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
REAL ESTATE

ARTICLE IV SHARES
The number of shares of stock is: 500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Gary Topha, President Name and Title: _____
Address: 5072 NW 7th Street, Bldg. 2, Address: _____
Apt. 1010 _____
Miami, FL 33126 _____

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: Harvey L. Rubinchik, Esq.
Address: 1860 N. Pine Island Road, Suite 201
Plantation, FL 33322

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Gary Topha
Address: 5072 NW 7th Street, Bldg. 2, Apt. 1010
Miami, FL 33126

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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

9/6/11
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.

Bery [Signature] AS P.O.A
Required Signature/Incorporator

8/26/11
Date

FUR GARY TOPHA