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

From: Account Name : SORSHER & ASSOCIATES, LLC.
Account Number : I20170000056
Phone : (954)842-2931
Fax Number : (954)842-2936

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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
LISTING LAUNCH FORMULA, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

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COVER LETTER

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

SUBJECT: LISTING LAUNCH FORMULA, 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: ALEXEI NAZAROV
Name (Printed or typed)

1060 BRICKEL AVE, APT 2115

Address

MIAMI, FL 33131

City, State & Zip

(850)376-0436

Daytime Telephone number

DMITRYSAPEROV@GMAIL.COM

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

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

22 APR 21 PM 9
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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: LISTING LAUNCH FORMULA, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1060 BRICKEL AVE, APT 2115

1060 BRICKEL AVE, APT 2115

MIAMI, FL 33131

MIAMI, FL 33131

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: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: NAZAROV, ALEXEI - P

Name and Title: _____

Address 1060 BRICKEL AVE, APT 2115

Address: _____

MIAMI, FL 33131

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: NAZAROV, ALEXEI

Address: 1060 BRICKEL AVE, APT 2115

MIAMI, FL 33131

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: NAZAROV, ALEXEI

Address: 1060 BRICKEL AVE, APT 2115

MIAMI, FL 33131

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

Alexei Nazarov

Required Signature/Registered Agent

04/21/2022

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.

Alexei Nazarov

Required Signature/Incorporator

04/21/2022

Date

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TALLAHASSEE, FLORIDA

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