

**F15000003208**

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

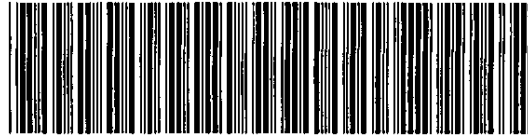
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

*W5-45442*

Office Use Only



900274577629

07/06/15--01010--004 \*\*70.00

2015 JUL 22 P 3:02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FILED**

JUL 23 2015

BRUCH



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 7, 2015

EYTAN KLEPACH  
3560 POLARIS AVE #27  
LAS VEGAS, NV 89102

SUBJECT: EXPO ENTERPRISE INC  
Ref. Number: W15000045642

We have received your document for EXPO ENTERPRISE INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

The document number of the name conflict is P10000052704.

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) 245-6051.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 615A00014100

FILED  
JUL 22 P 3:02  
TALLHASSEE, FLORIDA  
DEPARTMENT OF STATE

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: EXPO ENTERPRISE INC**  
Name of Corporation – must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

\_\_\_\_\_  
EYTAN KLEPACH  
Name of Person

\_\_\_\_\_  
Firm/Company

\_\_\_\_\_  
3560 POLARIS AVE #27  
Address

\_\_\_\_\_  
LAS VEGAS NV 89102  
City/State and Zip Code

\_\_\_\_\_  
LISA.PALUMBO@YJETAX.COM  
E-mail address: (to be used for future annual report notification)

2015 JUL 22 P 3:02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
FILED

For further information concerning this matter, please call:

\_\_\_\_\_  
EYTAN KLEPACH at ( 702 ) 685-8080  
Name of Person Area Code Daytime Telephone Number

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA**

**IN COMPLIANCE WITH SECTION 617.1501, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:**

1. Expo Enterprise Inc  
(Name of corporation must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of this import in language as well clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name in parent. "Company" or "Co." may not be used as a corporate suffix by a not-for-profit corporation.)

EXPO ENTERPRISE NV INC  
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. NEVADA 3. 46-4295998  
(State or country under the law of which it is incorporated) (FBI number, if applicable)

4. 12/11/2013 5. \_\_\_\_\_  
(Date of incorporation) (Date of formation, if other than perpetual)

6. \_\_\_\_\_  
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. as to domestic primary liability.)

7. 7191 Cadiz Blvd Orlando 32819  
(Principal office address)

3560 POLARIS AVE #27 LAS VEGAS NV 89103  
(Current mailing address, if different)

8. \_\_\_\_\_  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: RYAN KLEPACH

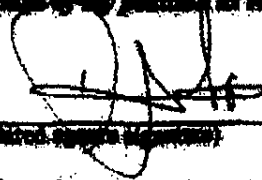
Office Address: 7191 CADIZ BLVD

ORLANDO Florida 32819  
(City) (Zip Code)

FILED  
 2013 JUL 22 P 3:02  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

**10. Registered agent's acceptance:**

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to do so on the condition that I shall remain qualified under the provisions of the statute relating to the proper and diligent performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

Attn: Deborah

12. Names and addresses of officers and/or directors

**A. DIRECTORS**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

**B. OFFICERS**

President: EKATERINA SHISHOV

Address: 3305 SPRING MOUNTAIN RD STE 79 LAS VEGAS NV 89102

Vice President: ANDREI KHOSH

Address: 3305 SPRING MOUNTAIN RD STE 79 LAS VEGAS NV 89102

Secretary: EKATERINA SHISHOV

Address: 3305 SPRING MOUNTAIN RD STE 79 LAS VEGAS NV 89102

Treasurer: EKATERINA SHISHOV

Address: 3305 SPRING MOUNTAIN RD ST LAS VEGAS NV 89102

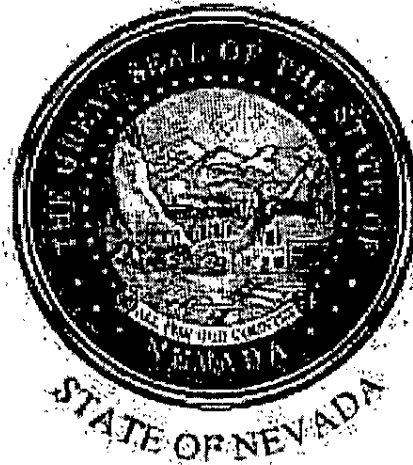
**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. \_\_\_\_\_  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. EKATERINA SHISHOV (PRESIDENT )  
(Typed or printed name and capacity of person signing application)

FILED  
2015 JUL 22 P 3:02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# SECRETARY OF STATE



## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, BARBARA K. CEGAUSKE, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **EXPO ENTERPRISE INC**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since December 11, 2013, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on June 25, 2015.

A handwritten signature in cursive script that reads "Barbara K. Cegauske".

BARBARA K. CEGAUSKE  
Secretary of State



Electronic Certificate  
Certificate Number: C20150625-0309  
You may verify this electronic certificate  
online at <http://www.nvsos.gov/>