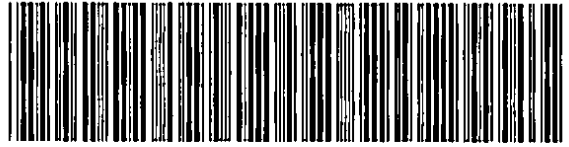


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100328431371

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

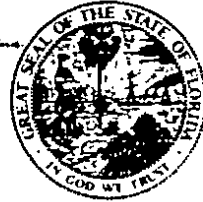
05/13/19 -- 01016 -- 0.07 -- 70.00

Special Instructions to Filing Officer:

05/13/19 10:53

Office Use Only

B KINSEY
JUN 04 2019



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 20, 2019

MAX GRABAR
360 NORTH STREET
WHITE PLAINS, NY 10605

SUBJECT: DOMIVKA PROPERTIES, INC.
Ref. Number: W19000049124

We have received your document for DOMIVKA PROPERTIES, 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 and title of the person signing the document must be noted beneath or opposite the signature.

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) 245-6052.

Brooke N Kinsey
Regulatory Specialist II

Letter Number: 119A00010186

RECEIVED
JUN 03 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DOMIVKA PROPERTIES, INC.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

MAX GRABAR

Name of Person

MARK S. GROSS CPA PC

Firm/Company

360 NORTH STREET

Address

WHITE PLAINS, NY 10605

City/State and Zip code

CONTACTUS@MARKGROSSCPA.COM

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

For further information concerning this matter, please call:

MAX GRABAR

914 949-5575
at ()

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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 CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

DOMIVKA PROPERTIES, INC.

1. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co." or "Corp.")

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

2. CONNECTICUT 3. 83-4606525 (State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 04/30/2019 5. (Date of incorporation) (Date of duration, if other than perpetual)

6. (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 304 HAMILTON AVE, STAMFORD, CT 06902 (Principal office address)

(Current mailing address, if different)

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

Name: ULYANA YOSYPIV

Office Address: 7990 BAYMEADOWS RD E UNIT 113

JACKSONVILLE, Florida 32256 (City) (Zip code)

Vertical stamp: 2019 JUN 10 10:11 AM

9. 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 act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

10. 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.

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: ULYANA YOSYPIV

Address: 304 HAMILTON AVE

STAMFORD, CT 06902

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

2018 JUN 13 11:45 AM

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

12. _____

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that 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.

13. ULYANA YOSYPIV President

(Typed or printed name and capacity of person signing application)

Secretary of The State of Connecticut

I, the Secretary of The State of Connecticut, and keeper of the seal thereof,
DO HEREBY CERTIFY, that the certificate of incorporation of

DOMIVKA PROPERTIES, INC.

a domestic STOCK corporation, was filed in this office on April 30, 2019, a certificate of dissolution has not been filed, the corporation has filed all annual reports, and so far as indicated by the records of this office such corporation is in existence.



Secretary of The State of Connecticut

Date Issued: May 06, 2019