

MI7000000321

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

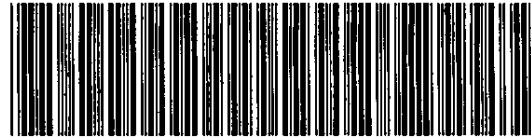
(Business Entity Name)

(Document Number)

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JAN 12 2017  
S. YOUNG

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STATE  
SECRETARY OF  
FALLAHASSEE, FLORIDA  
17 JAN 11 AM 12:22

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: SCI ANASTASIA, LLC**

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

Alexey Burya

Name of Person

SCI ANASTASIA, LLC

Firm/Company

290 174th st. #417

Address

Sunny Isles Beach, Florida 33160

City/State and Zip Code

aaa.travelagency@gmail.com

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
17 JAN 11 AM 12:22

For further information concerning this matter, please call:

Alexey Burya

754

244-1895

at ( )

Name of Contact Person

Area Code

Daytime Telephone Number

**MAILING ADDRESS:**

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

**STREET ADDRESS:**

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

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &  
Certificate of Status

☐ \$155.00 Filing Fee &  
Certified Copy

☒ \$160.00 Filing Fee, Certificate  
of Status & Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS  
IN FLORIDA**

*IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:*

1. SCI ANASTASIA, LLC.  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

ANASTASIA, LLC.

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. FRANCE 3. \_\_\_\_\_  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 290 174th st. #417, Sunny Isles Beach, Fl 33160  
\_\_\_\_\_  
(Street Address of Principal Office)

6. 290 174th st. #417, Sunny Isles Beach, FL 33160  
\_\_\_\_\_  
(Mailing Address)

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

Name: Alexey Burya  
Office Address: 290 174th st. #417  
Sunny Isles Beach, Florida 33160  
(City) (Zip code)

**Registered agent's acceptance:**

*Having been named as registered agent and to accept service of process for the above stated limited liability company 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)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Aleksei Maleka  
MGR  
290 174th st. #417, Sunny Isles Beach, FL 33160

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

\_\_\_\_\_  
Signature of an authorized person

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any 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.

Aleksei Maleka  
Typed or printed name of signee

FILED  
STATE  
SECRETARY OF  
TALLAHASSEE, FLORIDA  
17 JAN 11 AM 12:22



N° de gestion 2007ID00632

*Extrait Kbis*

**EXTRAIT D'IMMATRICULATION PRINCIPALE AU REGISTRE DU COMMERCE ET DES SOCIÉTÉS**  
à jour au 1 décembre 2016

**IDENTIFICATION DE LA PERSONNE MORALE**

<i>Immatriculation au RCS, numéro</i>	501 269 872 R.C.S. Antibes
<i>Date d'immatriculation</i>	27/11/2007
<i>Dénomination ou raison sociale</i>	SCI ANASTASIA
<i>Forme juridique</i>	Société civile immobilière
<i>Capital social</i>	1 000,00 Euros
<i>Adresse du siège</i>	chemin de la Cairée Quartier de la Salette 06570 Saint-Paul
<i>Durée de la personne morale</i>	Jusqu'au 26/11/2106

**GESTION, DIRECTION, ADMINISTRATION, CONTRÔLE, ASSOCIÉS OU MEMBRES**

**Gérant**

<i>Nom, prénoms</i>	SKRYNNIK Elena
<i>Date et lieu de naissance</i>	Le 30/08/1961 à Korkino (RUSSIE (FEDERATION DE))
<i>Nationalité</i>	Russe
<i>Domicile personnel</i>	Kiz Korabelnye Sosny Maslovo (RUSSIE (FEDERATION DE))

**Associé**

<i>Nom, prénoms</i>	KUKOTA Mikhaïl Iourievitch
<i>Date et lieu de naissance</i>	Le 13/01/2005 à Balachikha (RUSSIE (FEDERATION DE))
<i>Nationalité</i>	Russe
<i>Domicile personnel</i>	Minskaya St. 1 B Appt 5 121108 Moscou (RUSSIE (FEDERATION DE))

**Associé**

<i>Nom, prénoms</i>	KUKOTA Irina Iourievna
<i>Date et lieu de naissance</i>	Le 13/01/2005 à Balachikha (RUSSIE (FEDERATION DE))
<i>Nationalité</i>	Russe
<i>Domicile personnel</i>	Minskaya St. 1 B Appt 5 121108 Moscou (RUSSIE (FEDERATION DE))

**RENSEIGNEMENTS RELATIFS A L'ACTIVITE ET A L'ETABLISSEMENT PRINCIPAL**

<i>Adresse de l'établissement</i>	chemin de la Cairée Quartier de la Salette 06570 Saint-Paul
<i>Activité(s) exercée(s)</i>	Propriété, gestion et exploitation par bail, location ou toute autre forme d'immeubles.
<i>Date de commencement d'activité</i>	18/10/2007
<i>Origine du fonds ou de l'activité</i>	Création
<i>Mode d'exploitation</i>	Exploitation directe

Le Greffier



## LEGAL TRANSLATION SYSTEMS

220 71st Street, suite 217

Miami Beach, FL 33141

(855) 337-2852 Fax: (212) 786-7241

E-mail: [carlosdepaula@mindspring.com](mailto:carlosdepaula@mindspring.com)

A professional translation company  
[legaltranslationsystems.com](http://legaltranslationsystems.com)

### AFFIDAVIT OF ACCURACY

I HEREBY CERTIFY THAT THIS IS A TRUE TRANSLATION OF THE OF  
ORIGINAL DOCUMENT, AS PRESENTED TO ME, FROM FRENCH INTO  
ENGLISH

#### (BUSINESS REGISTRATION)

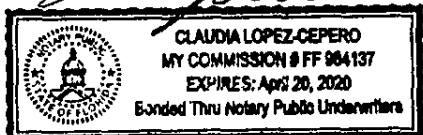
This affidavit refers exclusively to the correctness of the attached translation. This document should not be construed as an affidavit of authenticity of the original document, as pertaining to form, content or official character of signatory.


STATE OF FLORIDA) ss  
COUNTY OF DADE)

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
17 JAN 11 AM 12:22

I, CARLOS A. DE PAULA, being duly sworn, depose and say that I am fluent in the language pair above, that I am qualified to translate documents in this language pair, and that the translation attached hereto has been prepared by me and that it is a true and correct translation of the original language document as presented to me, to the best of my knowledge, ability and belief.

Sworn to before me on this JANUARY 9<sup>th</sup> day of 2017



  
CARLOS A. DE PAULA  
Member American Translators Association  
ATA Membership number 217642

LEGAL TRANSLATION SYSTEMS

220 71st ste 217, Miami Beach, FL 33141 (877) 626-0642/(212) 629-4541 e-mail: [carlosdepaula@mindspring.com](mailto:carlosdepaula@mindspring.com)  
[portuguesetranslations.com](http://portuguesetranslations.com) [academictranslations.com](http://academictranslations.com)

Business Court of Antibes  
Nova Antipolis, 60  
2nd Avenue, P.O. Box 619  
06632 Antibes Cedex

Number: 2007D00632  
Verification code: K53gycw96H  
<https://www.infogreffe.fr/controle>

Business Registration

Main Business Registry record  
As of December 1, 2016

Business Identification

Tax id number 501 269 872 R.C.S. Antibes  
Registration date 11/27/2007  
Name: SCI ANASTASIA  
Type of business: Real estate corporation  
Capital stock: 1,000.00 Euros  
Head office: Chemin de la Cairee Quartier de la Salette 06570 Saint-Paul  
Duration: 11/26/2106

MANAGEMENT, DIRECTORS, ADMINISTRATION, PARTNERS, MEMBERS

Manager

Full name SKRYNNIK Elena  
Place and date of birth 08/30/1961, Korkino (Russian Federation)  
Nationality Russian  
Residence Kiz Korabelnye Sosny Maslovo (Russian Federation)

Partner

Full name KUKOTA Mikhail Iourievitch  
Place and date of birth 01/13/2005 Balachikha (Russian Federation)  
Nationality Russian  
Residence Minskaya St. 1 B, apt 4, 121108 Moscow (Russian Federation)

Partner

Full name KUKOTA Irina Iourievna  
Place and date of birth 01/13/2005 Balachikha (Russian Federation)  
Nationality Russian  
Residence Minskaya St. 1 B, apt 4, 121108 Moscow (Russian Federation)

BUSINESS ACTIVITIES

Address: Chemin de la Cairee Quartier de la Salette 06570 Saint-Paul  
Activity: ownership, management and real estate lease, rental and other operations.  
Began activities on 10/18/2007  
Origin of funds or business: formation  
Operational mode: direct  
Signed by the Officer

END OF RECORD

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