# P0300043980

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# TRANSMITTAL LETTER

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

SUBJECT: Tel	le Exchange Group, inc		
	(PROPOSED CORPOR	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation an	d a check for:
•			
\$70.00	<b>□</b> \$78.75	<b>□</b> \$78.75	<b>□</b> \$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
-	& Certificate of Status	& Certified Copy	Certified Copy
			& Certificate of
			Status
		ADDITIONAL CO	OPY REQUIRED
	L!-! IZ		
FROM:	Leonid Kogan		
	Nam	e (Printed or typed)	
	16400 Collins Ave., Suite	2042	
	Address		
		Address	
	Miami El 22160		
	Miami, FL 33160		
	Cit	y, State & Zip	
	(305)949-2619		
	· · · · · · · · · · · · · · · · · · ·	Telephone number	

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



# FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

April 15, 2003

LEONID KOGAN 16400 COLLINS AVE. **SUITE 2042** MIAMI, FL 33160

SUBJECT: TELE EXCHENGE GROUP, INC. Ref. Number: W03000010692

We have received your document for TELE EXCHENGE GROUP, INC.. However, the document has not been filed and is being returned for the following:

The document must have original signatures.

Please return the original and one copy of 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) 245-6934.

Letter Number: 603A00022470

Loria Poole Corporate Specialist New Filings Section

# 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:

Tele Exchange Group, inc

# ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

16400 Collins Ave., Suite 2042 Miami, FL 33160

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Telecommunication consulting, and services

#### ARTICLE IV SHARES

The number of shares of stock is: 100 (at one sent per share)

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Vadim Daskovskiy 127 Crofton Hill Ln. Rockville, MD 20850 (Sales Director)

Leonid Kogan 16400 Collins Ave., Suite 2042 Miami, FL 33160 (Technical Director)

#### ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Leonid Kogan 16400 Collins Ave., Suite 2042 Miami, FL 33160

## ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Leonid Kogan 16400 Collins Ave., Suite 2042 Miami,FL 33160

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

Signature/Registered Agent

Signature/Incorporator

Date

**J**ate

