

P04000079346

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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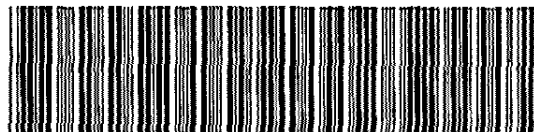
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
04 MAY 17 PM 12:55
TALLAHASSEE, FLORIDA

05-18-04
TB.

TRANSMITTAL LETTER

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

SUBJECT: ICONNECTION, 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
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: SUETLANA Y. KOROTKEVICH
Name (Printed or typed)

PO BOX 358292
Address

GAINESVILLE, FL 32635
City, State & Zip

352 222 8968
Daytime Telephone number

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

AFFIDAVIT:

I, Svetlana Y Korotkevich as incorporator and registered agent for IConnection, Inc. will not revoke the dissolution of the IConnection, Inc. as not-for-profit Florida corporation. I release the name "IConnection, Inc" from the not-for-profit corporation already dissolved to the for-profit Florida corporation with the same name which I plan to register in near future.

STATE OF Florida

County of Alachua

I, Svetlana Yuri Korotkevich
that the statements made above are true

Being first sworn, state

Sh
(Original Signature)

S. KOROTKEVICH
(Name)

Subscribed and sworn to before me this 14th day of May, Year 2004

Vicky L Barahona Vicky L Barahona
(Original Notary Public Signature)

Notary Seal
Or
Stamp

My commission expires _____

OFFICIAL NOTARY SEAL
VICKY L BARAHONA
NOTARY PUBLIC STATE OF FLORIDA
COMMISSION NO. DD020267
MY COMMISSION EXP. MAY 15 2005

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:

I CONNECTION, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1322 NW 106 ST
GAINESVILLE, FL 32606

MAILING ADDRESS:

POB 358292, GAINESVILLE FL 3263

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

List name(s), address(es) and specific title(s):

SVETLANA Y. KOROTKENCH, PRESIDENT
1322 NW 106 ST
GAINESVILLE, FL 32606**ARTICLE VI REGISTERED AGENT**


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

SVETLANA Y. KOROTKENCH
1322 NW 106 ST
GAINESVILLE, FL 32606**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

SVETLANA Y. KOROTKENCH
1322 NW 106 ST
GAINESVILLE, FL 32606

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

5.14.04

Date

Signature/Incorporator

5.14.04

Date

FILED

04 MAY 17 PM 12:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA