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\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

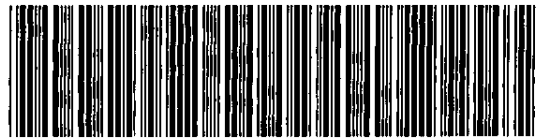
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

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Office Use Only

*[Handwritten Signature]*  
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2010 MAR 29 AM 10:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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## COVER LETTER

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

SUBJECT: SHEINA CORP

(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: SHEINA CORP

Name (Printed or typed)

10658 LA MANCHA AVE

Address

JACKSONVILLE, FL 32257

City, State & Zip

904-422-3451

Daytime Telephone number

MOROZTATIANA@TMACCOUNTANT.US

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

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

# 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: SHEINA CORP

## **ARTICLE II PRINCIPAL OFFICE**

The principal street address and mailing address, if different is:

10658 LA MANCHA AVE  
JACKSONVILLE, FL 32257

## **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: SERVICE

## **ARTICLE IV SHARES**

The number of shares of stock is: 1,000

## **ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

Veacheslav Maximov  
10658 LA MANCHA AVE  
JACKSONVILLE FL 32257

## **ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Veacheslav Maximov  
10658 LA MANCHA AVE  
JACKSONVILLE FL 32257

## **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Veacheslav Maximov  
10658 LA MANCHA AVE  
JACKSONVILLE, FL 32257

\*\*\*\*\*

*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

FILED  
2010 MAR 29 AM 10:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

02-10-10  
\_\_\_\_\_  
Date

02-10-10  
\_\_\_\_\_  
Date