

P110000050611

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

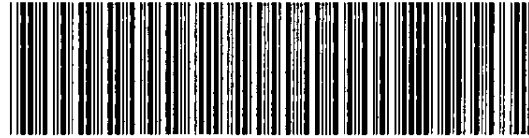
(Business Entity Name)

(Document Number)

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

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05/04/11--01023--016 \*\*87.50

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2011 MAY 20 PM 2:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SC  
5-6-11

4110000025305

2/1/27

## COVER LETTER

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

SUBJECT: Niki Foods, 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: MARGARITA DEONICHSHENKO  
Name (Printed or typed)

217 North Federal Hwy  
Address

HALLANDALE, FL 33009  
City, State & Zip

(954) - 458 - 9880  
Daytime Telephone number

SPUXUSA @ AOL.COM  
E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2011 MAY 20 PM 2:30

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

11 MAY 20 AM 10:49

DIVISION OF CORPORATIONS

May 6, 2011

MARGARITA DEONICHSHENKO  
217 NORTH FEDERAL HWY  
HALLANDALE, FL 33009

SUBJECT: NIKI FOODS, INC.  
Ref. Number: W11000025305

We have received your document for NIKI FOODS, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

Please return the corrected 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) 245-6924.

Sharon Collins  
Regulatory Specialist II  
New Filing Section

Letter Number: 211A00011127

**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:

Niki Foods, Inc

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

217 North Federal Hwy  
Hallandale, FL  
33009

Mailing address, if different is:

Same

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Grocery store

**ARTICLE IV SHARES**

The number of shares of stock is:

1000 (one thousand)

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

Name and Title:

Margarita Leonichshenko

Address:

217 N. Federal Hwy  
Hallandale, FL  
33009  
President

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

**ARTICLE VI REGISTERED AGENT**

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

Name:

Margarita Leonichshenko

Address:

217 N. Federal Hwy  
Hallandale, FL 33009

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name:

Margarita Leonichshenko

Address:

217 N. Federal Hwy  
Hallandale, FL 33009

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

Required Signature/Registered Agent

05-02-11

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the 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.

Required Signature/Incorporator

05-02-11

Date

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2011 MAY 20 PM 2:30

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