

**Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet**

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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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14 OCT 21 AM 11:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 OCT 21 PM 12:45

APPROVED
AND
FILED

**FLORIDA PROFIT/NON PROFIT CORPORATION
CIPHER ALLIANCE CORP.**

Certificate of Status	1
Certified Copy	1
Page Count	04
Estimated Charge	\$87.50

Electronic Filing Menu

Corporate Filing Menu

Help

VH

COVER LETTER

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

SUBJECT: CIPHER ALLIANCE CORP.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUBJECT)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Steven J. Solomon

Name (Printed or typed)

c/o GrayRobinson, P.A., 1221 Brickell Ave., Ste. 1600

Address

Miami, FL 33131

City, State & Zip

305-416-8880

Daytime Telephone number

cjzwebner@gmail.com

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

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

APPROVED
AND
FILED 3/4)

14 OCT 21 PM 12:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: **CIPHER ALLIANCE CORP.**

ARTICLE II PRINCIPAL OFFICE
Principal street address:

152 N.E. 167 Street
2nd Floor
North Miami Beach, FL 33162

Mailing address, if different is:

152 N.E. 167 Street
2nd Floor
North Miami Beach, FL 33162

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

Name and Title:	Charles Zwebnier, CEO, P. D	Name and Title:	Lazara Valmana, DOO, D
Address:	152 N.E. 167 Street	Address:	152 N.E. 167 Street
	2nd Floor		2nd Floor
	North Miami Beach, FL 33162		North Miami Beach, FL 33162

Name and Title:	_____	Name and Title:	_____
Address:	_____	Address:	_____

Name and Title:	_____	Name and Title:	_____
Address:	_____	Address:	_____

10/21/2014 10:28:15 From: To: 8506176381

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AND
FILED

14 OCT 21 PM 12:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Name and Title:	_____	Name and Title:	_____
Address:	_____	Address:	_____
	_____		_____
	_____		_____

ARTICLE VI. REGISTERED AGENT

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

Name: Lazara Valmanea
Address: 162 N.E. 167 Street - 2nd Floor
North Miami Beach, FL. 33182

ARTICLE VII. INCORPORATOR

The name and address of the incorporator is:

Name: Steven J. Solomon
Address: c/o Gray Robinson, P.A., 1221 Brickell Ave., Ste. 1800
Miami, FL 33131

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

Lazara Valmanea
Required Signature/Registered Agent

10/20/2014
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.817.133, F.S.

[Signature]
Required Signature/Incorporator

10/15/2014
Date