

P15 000054344

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

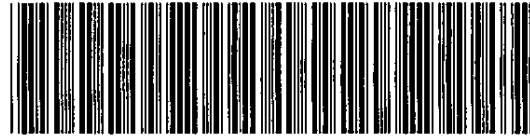
(Business Entity Name)

(Document Number)

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

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2015 JUN 15 AM 10:52  
CLERK OF STATE  
HARRISBURG, PA

XCD  
XCC 6/29/15

## COVER LETTER

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

**SUBJECT:** ALEX & MIKE 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:** Alexei Deleu  
\_\_\_\_\_  
Name (Printed or typed)

4393 85th Ave Cir E  
\_\_\_\_\_  
Address

Parrish, Florida, 34219  
\_\_\_\_\_  
City, State & Zip

941-264-4581  
\_\_\_\_\_  
Daytime Telephone number

alexei-deleu@mail.ru  
\_\_\_\_\_  
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: ALEX & MIKE INC

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
4393 85th Ave Cir E  
Parrish  
Florida 34219

Mailing address, if different is:  
PO Box 10  
Cortez  
Florida 34215

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: \_\_\_\_\_  
To conduct all kinds of legal business

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title:	<u>Alexei Deleu</u>	Name and Title:	_____
Address	<u>4393 85th Ave Cir E</u>	Address:	_____
	<u>Parrish</u>		_____
	<u>Florida 34219</u>		_____

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

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

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: Alexei Deleu

Address: 4393 85th Ave Cir E

Parrish, Florida, 34219

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: Alexei Deleu

Address: PO Box 10

Cortez, Florida, 34215

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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

10 June 2015

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

10 June 2015

Date