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FLORIDA DEPARTMENT OF STATE **Division of Corporations**

July 10, 2015

SUNSTATE RESEARCH

SUBJECT: PM 76, INC. Ref. Number: W15000046556

We have received your document for PM 76, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

PLEASE LIST THE NAMES OF THE DIRECTORS.

Please return 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) 245-6052.

Terri J Schroeder Regulatory Specialist II

Letter Number: 315A00014466

Sonstate Reseau	The second secon	
Address City/State/Zip Phone #	Office Use Only	
CORPORATION NAME(8) & BOCUM	-	
Corporation Name	(Documents)	æ
(Corporation Name)	(Document #)	
3. (Corporation Name)	(Document ≥)	
E. (Corporation Name)	(Document⊕)	
Walk in Pick up time Mail out U Will wait	Certified Copy Certificate of Status	
NEW FILINGS	AMENDMENTS	
Profit Wot for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Menger	J I
<u>Other filings</u>	REGISTRATION/OUALIFICATION	
Annual Report Ficultions Name	Foreign Limited Parinership Reinstatement Trademark Other	٠
	Ryamin and Tuttlole	

CRIE031(7/97)

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME. The name of the corpora				
ARTICLE II PRING 8542 Forest Run Lane,	CIPAL OFFICE Principal street address Orlando, FL 32836	225 Broa	Mailing address, if differe dway, Ste 1606, NYC, N	nt is: Y 10007
ARTICLE III PURPO	OSE the corporation is organized is:	Il lawful business		
ARTICLE IV SHAR	FS T		<u> </u>	
The number of shares of	Stock is: AL OFFICERS AND/OR DIRECTORS Philippe Bidal President and Director		Abbe L. KadishSecretar	y, Vice
Address	8542 Forest Run Lane	Address:	225 Broadway, Suite 16	06
	Orlando, FL 32836		New York, NY 10007	<u> </u>
Name and Title	:	Name and Title	:	SECRE IVISION
Address				TARY OF SOF COPE OR
Name and Title	:			ATE ATE
Address				

Name ai	nd Title:	Name and Title:	
Addres	s	Address:	
	REGISTERED AGENT Torida street address (P.O. Box NOT accept	otable) of the registered agent is:	
Name:	Marek Bezzubov	and the same of global and agreement	J. S.
Address:	5600 N. Flagler Dr., Apt 2402		SION SION
	West Palm Beach, FL 33407		L 10
			EU Y OF STATE ORPORATION PH 12: 00
ARTICLE VII	<u>INCORPORATOR</u>		0R/A
The name and a	ddress of the Incorporator is:		8 5
Name:	Fred Larison		-
Address:	307 Hamilton Street		
	Albany, NY 12210	·	
Effective date, it	EFFECTIVE DATE: f other than the date of filing: date is listed, the date must be specific an iling.)		
Note: If the dat the document's	e inserted in this block does not meet the ap effective date on the Department of State's r	ecords.	
Having been na this certificate, I	med as régistered agent to accept scriice of am familiar with and accépt the appointme	f process for the above stated corpor nt as registered agent and agree to a	act in this capacity
	Vx. 11/1/4		July 3, 2015
I submit this do	Required Signature/Registered Ag cument and affirm that the facts stated her Department of State constitutes a third degi	rein are true. I am aware that the f	/ Date False information submitted in a
4	(4.		
Real	Fired Signature/Incorporator		7/2/15 Date
•			,

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