## P160000334195

(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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March 24, 2016

RYBCHINSKIY 6858 ASHTON STREET BOYNTON BEACH, FL 33437

SUBJECT: RYBCHINSKIY Ref. Number: W16000022004

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

You must complete the attached "Articles of Incorporation" for processing.

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) 245-6052.

Letter Number: 516A00006069

Maryanne Dickey Regulatory Specialist II New Filing Section

www.sunbiz.org

## **COVER LETTER**

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

SUBJECT:	RYBCHINS	KIY IV TE NAME - MUST INCLI	<u>'C</u>			
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u> I	UDE SUFFIX)			
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:						
\$70.00 Filing Fee	S78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status			
		ADDITIONAL COPY REQUIRED				
	ALENTIN TE		JR			
_0;	AKLAND PARK	FL 333	34			
		elephone number	processors with the spirits against the desirable Market time to the			
· · · · · · · · · · · · · · · · · · ·	temilien & gm	ai 1. Com I for future annual report i	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)

TÎCLE II PRIM	CLE II PRINCIPAL OFFICE Principal street address			Mailing addr	ess, if ditterant is	16 A
358 ASH	TUN STRE	Έ7				×
•	BACH FL			22.22	43	
TICLE III PUR	POSE  1 the corporation is c	organized is:	Sevice	bussiness	hange	egt
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
TICLE V INIT	of stock is:/	ND/OR DIRECT		C and Title:		
number of shares of	of stock is:/ HAL OFFICERS AN tle: JGOR KY	NOVOR DIRECT SHOW	Tiy Name of STRET Address	md Title:		
TICLE V INIT	of stock is: A HAL OFFICERS AN Ite: IGOR RY 6858 A BOYWOW	NOVOR DIRECT SHOW	Kiy Name of STRET Address 33437	md Title:		
TICLE V INIT  Name and Ti  Address	of stock is:  IAL OFFICERS AN  Ide: GOR RY  6858 A  BUYWON  Ie:	NOVOR DURECT BEACH FO BEACH FO	Kiy Name of STRET Address 33437	and Title:		
TICLE V INIT  Name and Ti  Address  Name and Tit  Address	of stock is: A A A BOYNTON	NOVOR DURECT Show S SHOW S BEACH FO	Name a  STRET Addres  33437  Name a  Addres	and Title:		

Name and Title		Name and Title:	
Address		Address:	
			<del></del>
		**************************************	
ARTICLE VI REGIS	STERED AGENT		
The name and Florida:	street address (P.O. Box NOT acceptable) of	The registered agent is:	
Name: $\bigvee$	ALENTIN TERMILIEN JR		
Address: 3/	2 NE 38th Street	_	•
01	AMLAND PARK FL 33	334	
		<u></u>	ੱਲੋ
ARTICLE VII INCO	<u>RPORATOR</u>	17 17 17 17 17 17 17 17 17 17 17 17 17 1	AP T
The name and address	of the Incorporator is:		- Annuel
Name:	JALENTIN TERMILIEN	K Ta	<b>⇒</b> m
Address:	312 NE 38th Street		
	SAKLAND PARK FL		59
).	11/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1		
<u>ARTICLE VIII - EFFI</u>	ECTIVE DATE:		
Effective date, if other t	han the date of filing:	(OPTIONAL)	
days after the filing.)	fisted, the date must be specific and canno	t be more than five business days prior or	90 Dusiness
Note: If the date inserte	ed in this block does not meet the applicable	statutory filing requirements, this date will no	ot be listed as
	e date on the Department of State's records.		
Havivo been named as	rouistored anour to accept service of process	for the above stated corporation at the place	e designated in
this certificates, Ifim fun	itiar with and accept the appointment as reg	istered agent and agree to act in this capacity	y ,
/pVIA	/ LA -	4/6	1/2/16
- J.Woln E	Required Signature/Registered Agent	Da	ne e
I submit this document	and affirm that the facts stated herein are	true. I am aware that the false information	submitted in a
document of the Depury	ment of State constitutes a third degree felon 7	y as provided for in s.817.155, F.S.	
/Allen La	My	4/6	1 2016
Required Sig	gnay re/Incorporator		late