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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 : INTERSTATE FILINGS LLC
Account Number : 120110000086
Phone : (718) 569-2703
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Email Address: CONTACT@INTERSTATEFILINGS.COM

**FLORIDA PROFIT/NON PROFIT CORPORATION
EASY WAY TO HEY INC.**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

17 APR -3 PM 4:07

Division of Corporations
Florida Department of State
Commercial Information Services

17 APR -3 AM 9:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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APR 04 2017

T. SCOTT

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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: EASY WAY TO HEY INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

1037 MALAGA AVE

CORAL GABLES, FL 33134

Mailing address, if different is:

1037 MALAGA AVE

CORAL GABLES, FL 33134

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY LAWFUL PURPOSE

ARTICLE IV SHARES

The number of shares of stock is: 200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: DMITRIY PROSVIRNOV, PRESIDENT

Address: 1037 MALAGA AVE
CORAL GABLES, FL 33134

Name and Title: MAKSYM KHOLOD, TREASURER

Address: 1037 MALAGA AVE
CORAL GABLES, FL 33134

Name and Title: PETRO MUKHA, SECRETARY

Address: 1037 MALAGA AVE
CORAL GABLES, FL 33134

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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(cont.)

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:

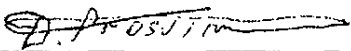
Name: DMITRIY PROSVIRNOV
 Address: 1037 MALAGA AVE
CORAL GABLES, FL 33134

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: DMITRIY PROSVIRNOV
 Address: 1037 MALAGA AVE
CORAL GABLES, FL 33134

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

03-30-17
 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

03-30-17
 Date

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