

P190000069304

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 : SORSHER & ASSOCIATES, LLC.
Account Number : I20170000056
Phone : (954)842-2931
Fax Number : (954)842-2936

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

Email Address: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
CONSULTING & DEVELOPMENT PROJECTS, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

19 SEP 10 PM 6:08
SECRETARY OF STATE
TAMMASEE, FLORIDA

2019 SEP 10 AM 7:58

COVER LETTER

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

SUBJECT: CONSULTING & DEVELOPMENT PROJECTS, 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 ☐ \$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: YEVGENI GERSHMAN

Name (Printed or typed)

1200 N FEDERAL HWY

Address

HOLLYWOOD, FL 33020

City, State & Zip

Daytime Telephone number

CONSULTINGANDDEVELOPMENTI@GMAIL.COM

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 CONSULTING & DEVELOPMENT PROJECTS, INC.
The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE
Principal street address
1200 N FEDERAL HWY
HOLLYWOOD, FL 33020

Mailing address, if different is: _____

ARTICLE III PURPOSE ALL LEGAL BUSINESS AND SERVICES
The purpose for which the corporation is organized is: _____

ARTICLE IV SHARES 100
The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: YEVGENI GERSHMAN - P

Name and Title: _____

Address: 1200 N FEDERAL HWY
HOLLYWOOD, FL 33020

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

19 SEP 10 PM 6:08
CLERK 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: YEVGENI GERSHMAN
Address: 1200 N FEDERAL HWY
HOLLYWOOD, FL 33020

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: YEVGENI GERSHMAN
Address: 1200 N FEDERAL HWY
HOLLYWOOD, FL 33020

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 09-09-2019 (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 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

Yevgeni Gershman
Required Signature/Registered Agent

09-09-2019
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.

Yevgeni Gershman
Required Signature/Incorporator

09-09-2019
Date