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COVER LETTER

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

SRQ CGC CORP

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

S70.00 Filing Fee S78.75 Filing Fee & Certificate of Status \$78.75
 \$87.50
 Filing Fee
 & Certified Copy
 & Certificate of Status
 ADDITIONAL COPY REQUIRED

SRQ REAL ESTATE ADVISORS CORP.

FROM:

Name (Printed or typed)

3201 N TAMIAMI TRAIL

Address

SARASOTA, FL 34234

City, State & Zip

941 363 1399

Daytime Telephone number

NELTRUSTSRQ@GMAIL.COM

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

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

<u>ARTICLE II PRINC</u>	IPAI. OFFICE					
3201 N. TAMIAMI TR	Principal <u>street</u> address AIL		٢	Aailing address	, if different is:	
SARASOTA, FL 34234						
<u>ARTICLE III PURPO</u> The purpose for which t	<u>2SE</u> he corporation is organized is:	ANY AND ALL		JSINESS		- <u></u>
	ES 1000 stock is:				-1 Ph	
Name and Title	PETRENKO ALEN		ame and Title	Р		
	3201 Ν ΤΑΜΙΑΧΗ ΤΡΑΠ					
Address	SARASOTA, FL 34234		udress.			<u></u> .
Name and Title:	FILIPSKIY NATALYA	N	ame and Title:	۷′P		
Address	3201 N TAMIAMI TRAIL	Λ	ddress:		<u></u>	
	SARASOTA, FL 34234					
Name and Title:		N	ame and Title:	S. TR		
Address	3201 N TAMIAMI TRAIL	A	ddress:	· · · · · · · ·	. · · · · ·	

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:
 SRQ REAL ESTATE ADVISORS CORP

 Address:
 3201 N TAMIAMI TRAIL

 SARASOTA, FL 34234

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name:	NATALYA FILIPSKIY			
Address:	3201 N. TAMIAMI TRAIL			
	SARASOTA, FL 34234			

<u>ARTICLE VIII EFFECTIVE DATE:</u> Effective date, if other than the date of filing: ______

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 days prior or 90 days after the filing.)

<u>Note:</u> 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

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 \$817.155, F.S.

~-) 1.1 Lang

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Required Signature/Incorporator

09/27/2019

09/27/2019

Date

Date