## Florida Department of State

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		To:				
			Division of Co	rporations		
			Fax Number	: (850)617-6381		
		From:				
			Account Name	: SORSHER & ASSOCIATES, LLC.		
			Account Number	: 120170000056		
			Phone	: (954)842-2931		
		ن. د	Fax Number	: (954)842-2936		
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OCEAN 28, INC.

Electronic Filing Menu

Corporate Filing Menu

Help



1/9/2020 10:24:36 AM PAGE

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Fax Server



January 9, 2020

FLORIDA DEPARTMENT OF STATE
Division of Corporations

SORSHER & ASSOCIATES, LLC.

SUBJECT: OCEAN 28, INC.

REF: W20000001864

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

If you have any questions concerning the filing of your document, please call (850) 245-6052.

WILLIAM LAWRENCE Regulatory Specialist II

FAX Aud. #: H20000007320 Letter Number: 420A00000568

2020 JAN -9 AM II: 44 SECHETARY OF STATE

## COVER LETTER

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

SUBJECT:	OCEAN 28, INC.					
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)						
Enclosed are an ori	ginal and one (1) copy of the art	icles of incorporation and	a check for:			
전 \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status			
		ADDITIONAL CO	PY REQUIRED			
FROM:	OCEAN 28, INC.					
	Name	(Printed or typed)	<del></del>			
	2080 S OCEAN DR #1609					
2080 S OCEAN DR #1609  Address  Address						
HALLANDALE, FL 33009						
	City State & Zin					
	Daytine Telephone number					
<del></del>	Daytime Telephone number					
	E-mail address: (to be used	for future unnual raport no	tiffortion)			

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)

CLE II PRINC	CIPAL OFFICE			
<del></del>	Principal street address	Mailing a	ddress, if different is:	
S OCEAN DRIVE #16	109	3001 NE 186TH STREET #603		
ALLANDALE, F	33009	AVENTURA, FL 33180		
CLE III PURPO	OSE the corporation is organized is:	- · <del>-</del>		
ALL LEGAL BU	SINESS AND SERVICES			
	<del>-</del> ,			
			_	
		<del></del>		
CLE IV SHARE	<u>·s</u>			
CLE IV SHARE mber of shares of s	400	<del></del>		
mber of shares of s	400	<del></del>		
mber of shares of s	OFFICERS AND/OR DIRECTORS	Name and Title:	202 SE	
mber of shares of s  LE V INITIAL  Name and Title:	OFFICERS AND/OR DIRECTORS  SERGEY KUNAKIN - P		<del></del>	
mber of shares of s  LE V INITIAL  Name and Title:	OFFICERS AND/OR DIRECTORS  SERGEY KUNAKIN - P	Name and Title:	三	
mber of shares of s  LE V INITIAL  Name and Title:	DOCK is: 100  LOFFICERS AND/OR DIRECTORS  SERGEY KUNAKIN - P  2080 S OCEAN DR #1609  HALLANDLE, FL 33009	Name and Title:	JAN - 9 RETARY LLAHAS	
mber of shares of s  LE V INITIAL  Name and Title:  Address	DOS SOCEAN DR #1609 HALLANDLE, FL 33009	Name and Title: Address:	JAN -9 RETARY LLAHAS	
mber of shares of s  LE V INITIAL  Name and Title:  Address	DOCK is: 100  LOFFICERS AND/OR DIRECTORS  SERGEY KUNAKIN - P  2080 S OCEAN DR #1609  HALLANDLE, FL 33009	Name and Title: Address:	JAN -9 AM II: RETARY OF ST LLAHASSEE.F	
mber of shares of s  LE V INITIAL  Name and Title:  Address	DOS SOCEAN DR #1609 HALLANDLE, FL 33009	Name and Title: Address:  Name and Title:	JAN -9 AM II: RETARY OF ST LLAHASSEE.F	
Mber of shares of some and Title:  Address  Name and Title:	OFFICERS AND/OR DIRECTORS SERGEY KUNAKIN - P 2080 S OCEAN DR #1609 HALLANDLE, FL 33009	Name and Title: Address:  Name and Title: Address:	JAN -9 AM II: RETARY OF ST LLAHASSEE.F	
Mber of shares of some and Title:  Address  Name and Title:	OFFICERS AND/OR DIRECTORS SERGEY KUNAKIN - P 2080 S OCEAN DR #1609 HALLANDLE, FL 33009	Name and Title: Address:  Name and Title: Address:	JAN -9 AM II: RETARY OF ST LLAHASSEE.F	
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Mber of shares of some of shares of some and Title:  Address  Name and Title:  Address	OFFICERS AND/OR DIRECTORS SERGEY KUNAKIN - P 2080 S OCEAN DR #1609 HALLANDLE, FL 33009	Name and Title: Address:  Name and Title: Address:  Name and Title: Name and Title:	JAN -9 AM II: 44 RETARY OF STATE LLAHASSEE. FL	

Name and	Title:	Name and Title:	
Address			
		<del></del>	
ARTICLE VI R. The name and Flo	EGISTERED AGENT ridu street address (P.O. Box NOT acceptab	ole) of the registered agent is:	
Name:	SERGEY KUNAKIN	=	
Address:	2080 6 OCEAN DA	3 # 1609	
	HALLANDALE FL3	3009	
ARTICLE VII 1	NCORPORATOR		
The name and add	ress of the Incorporator is:		
Name:	SERGEY KUNAKIN		
Address:	2080 S OCEAN DR #1609		
	HALLANDALE, FL 33009		
Effective date, if ou (If an effective date filing.)	FFECTIVE DATE: ther than the date of filing: to is listed, the date must be specific and ca	nnut be more than five days pr	ior or 90 days ther
Note: If the date in the document's effe	serted in this block does not meet the application of State's reconstituted on the Department of State's reconstitute.	able statutory filing requirements, rds.	AAS
Huving been named certificate, I am fam	as registered agent to accept service of proce illar with and accept the appointment as regi	ess for the above stated corporation istered agent and agree to act in th	at the place deviable in this
	Sergey Kunakin Required Signature/Registered Agent		01/07/2020
	Required Signature/Registered Agent		Date
document to the Dep	ent und uffirm that the facts stated herein c artment of State constitutes a third degree fe	are true. I am aware that the fall lony as provided for in £817.155,	se information submitted in a F.S.
•	Sergey Kunakin ncorporator		01/04/2020
Required Signature/	ncorporator	Date	