

7/13/2020

Division of Corporations

Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet
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FLORIDA PROFIT/NON PROFIT CORPORATION
US VIKTAR TRANS INC.

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

2020 JUL 14 AM 9:14

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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: US VIKTAR TRANS INC.

ARTICLE II PRINCIPAL OFFICE
Principal street address

17109 N BAY RD., #401D
SUNNY ISLES BEACH, FL 33160

Mailing address, if different is:

17109 N BAY RD., #401D
SUNNY ISLES BEACH, FL 33160

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:	<u>VIKTAR USTSINOVICH</u>	Name and Title:	_____
Address	<u>17109 N BAY RD., #401D</u>	Address:	_____
	<u>SUNNY ISLES BEACH, FL 33160</u>		_____
	_____		_____

Name and Title:	_____	Name and Title:	_____
Address	_____	Address:	_____
	_____		_____
	_____		_____

Name and Title:	_____	Name and Title:	_____
Address	_____	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:

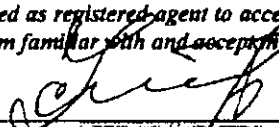
Name: VIKTAR USTSINOVICH
 Address: 17109 N BAY RD., #401D
SUNNY ISLES BEACH, FL 33160

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: VIKTAR USTSINOVICH
 Address: 17109 N BAY RD., #401D
SUNNY ISLES BEACH, FL 33160

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 my appointment as registered agent and agree to act in this capacity

	<u>7-12-20</u>
<u>(Required Signature/Registered Agent)</u>	<u>(Date)</u>

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.

	<u>7-12-20</u>
<u>(Required Signature/Incorporator)</u>	<u>(Date)</u>

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