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9/29/2020

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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 : SORSHER & ASSOCIATES, LLC.  
Account Number : I20170000056  
Phone : (954)842-2931  
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20 OCT -1 PM 6:57  
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\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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## FLORIDA PROFIT/NON PROFIT CORPORATION

## ONE CREATION 108, INC

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

2020 OCT -1 PM 2:57

10/01/2020 11:45 AM FAX 9548422936  
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SORSHER & ASSOCIATES

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9/30/2020 9:40:34 AM PAGE 1/001 Fax Server



September 30, 2020

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

SORSHER & ASSOCIATES, LLC

SUBJECT: ONE CREATION 108, INC  
REF: W20000112060

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 name of the entity listed on the fax cover sheet and the name of the entity listed in the document must be identical. Please amend the document or the fax cover sheet accordingly.

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

Derrick Thompson  
Regulatory Specialist II  
New Filing Section

FAX Aud. #: H20000338786  
Letter Number: 920A00018822

## COVER LETTER

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

SUBJECT: ONE CREATION 108, 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: ONE CREATION 108, INC  
Name (Printed or typed)

20801 BISCAYNE BLVD, SUITE 403, OFFICE 459  
Address

AVENTURA, FL 33180  
City, State & Zip

(717)460-0832  
Daytime Telephone number

ONECREATION2020@AOL.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**The name of the corporation shall be: ONE CREATION 108, INC**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

20801 BISCANE BLVD, STE 403, OFFICE 45920801 BISCANE BLVD, STE 403, OFFICE 459AVENTURA, FL 33180AVENTURA, FL 33180**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: VALERII PETROV - P

Name and Title: \_\_\_\_\_

Address 20801 BISCANE BLVD, STE 403, OFFICE 459

Address: \_\_\_\_\_

AVENTURA, FL 33180

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

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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: VALERII PETROV  
 Address: 20801 BISCANE BLVD, STE 403, OFFICE 459  
AVENTURA, FL 33180

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 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: VALERII PETROV  
 Address: 20801 BISCANE BLVD, STE 403, OFFICE 459  
AVENTURA, FL 33180

**ARTICLE VIII EFFECTIVE DATE:**

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.)

**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*

Valerii Petrov 09/29/2020  
 Required Signature/Registered Agent 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.*

Valerii Petrov 09/29/2020  
 Required Signature/Incorporator Date