Florida Department of State Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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	Division of Corporatio	ns		•:	
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To: Florida Division of Corporations

October 8, 2020

Dear Sir or Madame,

Please note that we voluntarily dissolved Torbistar Soccer Academy, Inc (Florida Non-Profit Corporation Document Number N20000003445) on August 22, 2020 and have no intention of reinstating this corporation.

Sincerely,

Dmitry Torbinsky

President

2020 OCT -8 F/1 4: 53

COVER LETTER

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

SUBJECT:	TORBISTAR SOCCER ACADI	EMY, INC.			
	(PROPOSED CORPORA		UDE SUFFIX)		
Enclosed are an ori	ginal and one (1) copy of the artic	cles of incorporation and	d a check for:	_	
\$₹ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certified Copy & Certificate of Status	f	
		ADDITIONAL CO	PY REQUIRED		
FROM:	TORBISTAR SOCCER AC			_	
	Name (Printed or typed)		2020 OCT	
	Ac	ddress	— ——.,;	3- ∓	
	SUNNY ISLES BEACH		•	字	
	City, §	tate & Zip			 ;
	(786)644-8424		_ ,	ပ်	
		ephone number	-		
	torbinskiyd@gmail.com E-mail address: (to be used f	3-1-1			
	E-mair address, (to be ased I	or ruture annual report no	ouncation)		

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 PR	INCIPAL OFFICE			
Principal street address			Mailing address, if different is:	
101 COLLINS AVE, 401 STE		18101 COLLINS AVE, 40, STE		
NNY ISLES B	EACH, FL 33160		INY ISLES BEACH, FL 33160	
CLE III PUI urpose for whic	RPOSE ch the corporation is organized is:Al_	L AND ANY LAWF	FUL BUSINESS	
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CLE IV SHA				
CLE IV SHA				
imber of shares				
omber of shares	of stock is: 100	·····	TORBINSKIY, EVGENIYA- VP,S	
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Name and T Address	of stock is: 100 FIAL OFFICERS AND/OR DIRECTORS itle: TORBINSKIY, DMITRY - P.T 18101 COLLINS AVE, 401 STE SUNNY ISLES BEACH, FL 33160	Name and Title: Address:	TORBINSKIY, EVGENIYA- VP,S 18101 COLLINS AVE, 401 STE SUNNY ISLES BEACH, FL 33160	
Name and Tit	of stock is: 100 TIAL OFFICERS AND/OR DIRECTORS itle: TORBINSKIY, DMITRY - P.T 18101 COLLINS AVE, 401 STE	Name and Title: Address: Name and Title:	TORBINSKIY, EVGENIYA- VP,S 18101 COLLINS AVE, 401 STE SUNNY ISLES BEACH, FL 33160	
Name and T Address	of stock is: 100 FIAL OFFICERS AND/OR DIRECTORS itle: TORBINSKIY, DMITRY - P.T 18101 COLLINS AVE, 401 STE SUNNY ISLES BEACH, FL 33160	Name and Title: Address:	TORBINSKIY, EVGENIYA- VP,S 18101 COLLINS AVE, 401 STE SUNNY ISLES BEACH, FL 33160 1.2021 OC	
Name and Tit	of stock is: 100 FIAL OFFICERS AND/OR DIRECTORS itle: TORBINSKIY, DMITRY - P.T 18101 COLLINS AVE, 401 STE SUNNY ISLES BEACH, FL 33160	Name and Title: Address: Name and Title:	TORBINSKIY, EVGENIYA- VP,S 18101 COLLINS AVE, 401 STE SUNNY ISLES BEACH, FL 33160 CT	
Name and Tit	of stock is: 100 FIAL OFFICERS AND/OR DIRECTORS itle: TORBINSKIY, DMITRY - P.T 18101 COLLINS AVE, 401 STE SUNNY ISLES BEACH, FL 33160	Name and Title: Address: Name and Title:	TORBINSKIY, EVGENIYA- VP,S 18101 COLLINS AVE, 401 STE SUNNY ISLES BEACH, FL 33160	
Name and Tit Address Address	of stock is: FIAL OFFICERS AND/OR DIRECTORS itle: TORBINSKIY, DMITRY - P,T 18101 COLLINS AVE, 401 STE SUNNY ISLES BEACH, FL 33160	Name and Title: Address: Name and Title: Address:	TORBINSKIY, EVGENIYA- VP,S 18101 COLLINS AVE, 401 STE SUNNY ISLES BEACH, FL 33160 1- 200 CT + 8	
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Name ar	nd Title:	Name and Title:
Addres		
ARTICLE VI	REGISTERED AGENT Iorida street address (P.O. Box NOT acceptable) of the registered agent is:
Name:	TORBINSKIY, DMITRY	
Address:	18101 COLLINS AVE, 401 STE	
	SUNNY ISLES BEACH, FL 33160	
<u>ARTICLE VII</u>	<u>INCORPORATOR</u>	
The name and ac	Idress of the Incorporator is:	
Name:	TORBINSKIY, DMITRY	
Address:	18101 COLLINS AVE, 401 STE	_
	SUNNY ISLES BEACH, FL 33160	 .
Effective date, if	EFFECTIVE DATE: other than the date of filing: that is listed, the date must be specific and can	not be more than five days prior or 90 days after the
Note: If the date the document's el	inserted in this block does not meet the applicate flective date on the Department of State's record	ole statutory filing requirements, this date will not be listed as
Having been nam certificate, I om fo	ned as registered agent to accept service of proces. imiliar with and accept the appointment as regis.	s for the above stated corporation at the place designated in this tered agent and agree to act in this capacity
<u> </u>	Required Signature/Registered Agent	
I submit this doc document to the L	ument and affirm that the facts stated herein a Department of State constitutes a third degree felo	re true. I am aware that the fulse information submitted in a ony as provided for in s.817.155, F.S.
	MS	10.08-2020
Required Signatur	The porator	Date 70 CO 2 C20