

P21 0000 221 83

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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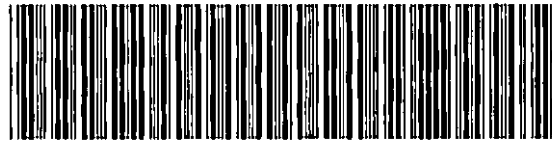
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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03/09/21--01017--008 **70.00

2021 MAR -9 PM 1:55

21 MAR -9 PM 2:05

CAPITAL CONNECTION, INC.

17 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

NY'S DEMIDOV INC

Signature _____

Requested by: BRANDEN

03/09/21

Name _____

Date _____

Time _____

Check-In _____

Will Pick Up _____

Ponder's Printing • Tallahassee, GA 32301

- _____ Art of Inc. File _____
- _____ LTD Partnership File _____
- _____ Foreign Corp. File _____
- _____ L.C. File _____
- _____ Fictitious Name File _____
- _____ Trade/Service Mark _____
- _____ Merger File _____
- _____ Art. of Amend. File _____
- _____ RA Resignation _____
- _____ Dissolution / Withdrawal _____
- _____ Annual Report / Reinstatement _____
- _____ Cert. Copy _____
- _____ Photo Copy _____
- _____ Certificate of Good Standing _____
- _____ Certificate of Status _____
- _____ Certificate of Fictitious Name _____
- _____ Corp Record Search _____
- _____ Officer Search _____
- _____ Fictitious Search _____
- _____ Fictitious Owner Search _____
- _____ Vehicle Search _____
- _____ Driving Record _____
- _____ UCC 1 or 3 File _____
- _____ UCC 11 Search _____
- _____ UCC 11 Retrieval _____
- _____ Courier _____

COVER LETTER

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

SUBJECT: DENYS DEMIDOV 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: PBM CONSULTING COMPANY

Name (Printed or typed)

100 VILLAGE GREEN DR SUITE 220

Address

LINCOLNSHIRE IL 60069

City, State & Zip

6304404975

Daytime Telephone number

ADMIN@PBM-CONSULTING.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: DENYS DEMIDOV INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1916 SW 28TH WAY

FORT LAUDERDALE FL 33312

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TRUCKING

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: DENYS IVANCHYNA, PRESIDENT

Name and Title: _____

Address

1916 SW 28TH WAY

Address: _____

FORT LAUDERDALE FL 33312

Name and Title: _____

Name and Title: _____

Address

Address: _____

Name and Title: _____

Name and Title: _____

Address

Address: _____

2021 MAR -9 PM 1:55

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: DENYS IVANCHYNA

Address: 1916 SW 28TH WAY

FORT LAUDERDALE FL 33312

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: DENYS IVANCHYNA

Address: 1916 SW 28TH WAY

FORT LAUDERDALE FL 33312

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

Denys Ivanchyna
Required Signature/Registered Agent

03/08/2021
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.

Denys Ivanchyna
Required Signature/Incorporator

03/08/2021
Date