

P210000 24404

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

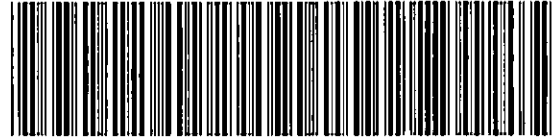
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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03/19/21--01006--008 \*\*70.00

2021 MAR 19 PM 2:37

21 MAR 19 AM 10:37

## COVER LETTER

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

SUBJECT: Blue Elephant Construction Corp  
(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: GRIGORY KRIVTSOV  
Name (Printed or typed)

277 Rotonda Circle  
Address

Rotonda West, FL 33947  
City, State & Zip

941 666 0985  
Daytime Telephone number

G.krivtsov@yahoo.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: Blue Elephant Construction Corp

ARTICLE II PRINCIPAL OFFICE

Principal street address

277 Rotonda Circle  
Rotonda West, FL 33947

Mailing address, if different is:

277 Rotonda Circle  
Rotonda West, FL 33947

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: 100,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Dimitri Alexandrovski

CEO/President, TR  
Name and Title: \_\_\_\_\_

Address: 277 Rotonda Circle

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

Rotonda West, FL 33947

Name and Title: Grigory Krivosov

President, Secretary  
Name and Title: \_\_\_\_\_

Address: 277 Rotonda Circle

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

Rotonda West, FL 33947

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

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

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

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

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: Aleksandr Filipshiy, P.A.

Address: 2912 Bee Ridge Rd, Suite 202  
Sarasota, FL 34239

**ARTICLE VII INCORPORATOR**

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

Name: Aleksandr Filipshiy PA

Address: 2912 Bee Ridge Rd, Suite 202  
Sarasota, FL 34239

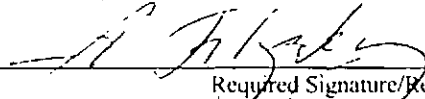
**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 03/19/2021 (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.)

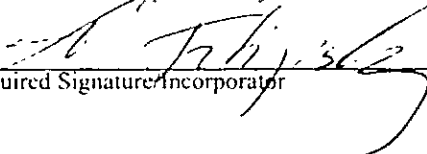
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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*

  
Required Signature/Registered Agent

03/18/21  
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.*

  
Required Signature/Incorporator

03/18/21  
Date