

To: +18506176381

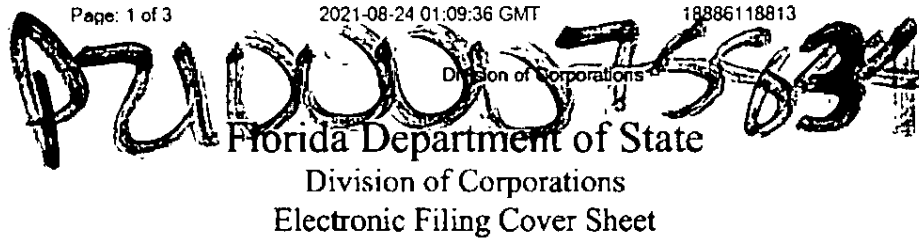
8/23/2021

Page: 1 of 3

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From: Vcorp Services, LLC



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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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : Vcorp SERVICES, LLC
Account Number : I20080000067
Phone : (845)425-0077
Fax Number : (845)818-3588

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
L30 USA Inc.

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
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Corporate Filing Menu

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAMEThe name of the corporation shall be: L30 USA Inc.**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

11643 Anhinga Ave, Venice, FL 3429211643 Anhinga Ave, Venice, FL 3429**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: any lawful activity**ARTICLE IV SHARES**The number of shares of stock is: 10,000**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: Oleksandr Ivanov, CEOAddress: 6503 34th Ave Ct E
Tacoma, WA 98443Name and Title: Oleksandr Ivanov, CFOAddress: 6503 34th Ave Ct E
Tacoma, WA 98443Name and Title: Oleksandr Ivanov, SecretaryAddress: 6503 34th Ave Ct E
Tacoma, WA 98443Name and Title: Oleksandr Ivanov, DirectorAddress: 6503 34th Ave Ct E
Tacoma, WA 98443

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

2021/08/24 AM 9:02

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

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Vcorp Services, LLC
 Address: 5011 South State Road 7, Suite 106
Davie, FL 33314

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: Yakov Moldavskiy, LL.M., Esq.
 Address: 921 Fletcher Ln., #214
Hayward, CA 94544

2021 AUG 24 AM 9:02

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*




 Required Signature/Registered Agent

Miriam Nachison
 Assistant Secretary

08/23/2021

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.



 Required Signature/Incorporator

08/23/2021

Date