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.

(((H21000381274 3)))



To:					
	Division of Corporations				(/1/
•	Fax Number : (850)617-6383	Ĺ			Make
From:					141716
	Account Name : EXPRESS CORPO	RATE FILI	NG SERVICE	INC.	
	Account Number : I200000000146 Phone : (305)444-4994				
	Fax Number : (305)444-4977				
an	the email address for this businual report mailings. Enter only		l address _l		**
an Em	nual report mailings. Enter only	one emai	1 address	TION	**
an Em	nual report mailings. Enter only ail Address: FLORIDA PROFIT/NON PR	one emai	1 address	TION	**
an Em	nual report mailings. Enter only ail Address: FLORIDA PROFIT/NON PR ZERO KNOWLEDGE	one emai	1 address ORPORA	TION	BEORE DON'S
an Em	nual report mailings. Enter only ail Address: FLORIDA PROFIT/NON PR ZERO KNOWLEDGE Certificate of Status	one emai	ORPORA CH, INC	TION	**

Electronic Filing Menu

Corporate Filing Menu

Help

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

RTICLE II PRINCIPAL OFFICE Principal street address		Mailing R	Mailing address, if different is:		
20 E HALLANDALE	BEACH BLVD STE PH9				
ALLANDALE BEAC	H, FL 33009				
TICLE III PURP purpose for which	OSE the corporation is organized is:ANY AND	DALL LAWFUL BUSINESS			
TICLE IV SHAR number of shares of			2021 OCT 12 SECREDAR TALLARA		
	e: SLAVA BURMISTROV (P)	Name and Title:	်္		
Address	1920 E HALLANDALE BEACH BLVD		10: S		
	STE PH 9		, , ,		
	HALLANDALE BEACH, FL 33009				
Name and Title	:	Name and Title:			
Address		Address:			
Name and Title	:				

Name and Ti	tle:	Name and Title:
Address		Address:
ARTICLE VI REG	GISTERED AGENT	
	la street address (P.O. Box NO'l' acceptable) of	the registered agent is:
Name: 5	SLAVA BURMISTROV	
Address:	1920 E HALLANDALE BEACH BLVD STE PH 9	
	HALLANDALE BEACH, FL 33009	
ARTICLE VII INC	<u>CORPORATOR</u>	202 SEC T7
The name and address of the Incorporator is:		
Name:	SLAVA BURMISTROV	
Address:	1920 E HALLANDALE BEACH BLVD STE PH	19 (7) TO
	HALLANDALE BEACH, FL 33009	
		₹ 25 25
Effective date, if other	r than the date of tiling:	(OPTIONAL)
(If an effective date filing.)	is listed, the date must be specific and cannot	be more than five days prior or 90 days after the
	erted in this block does not meet the applicable stive date on the Department of State's records.	statutory filing requirements, this date will not be listed as
	as registered agent to accept service of process for liar with and accept the appointment as registere	r the above stated corporation at the place designated in this d agent and agree to act in this capacity
	Starl	10/12/2021
	Required Signature/Registered Agent	Date /
I submit this docume	ent and affirm that the facts stated herein are t artment of State constitutes a third degree felony	rue. I am aware that the false information submitted in a as provided for in s.817.155. F.S.
and an interest of the paper	Slow	10/12/2021
Required Signature/In		Date O/12/