Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6381

From:

Account Name : VCORP SERVICES, LLC

Account Number : 120080000067 Phone : (845)425-0077 Fax Number : (845)818-3538

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

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FLORIDA PROFIT/NON PROFIT CORPORATION PlexDepo Corp.

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Electronic Filing Menu

Corporate Filing Menu

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ARTICLES OF INCORPORATION

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

020 NW 129th Ave Unit 208 fiami, FL 33182 RTICLE III PURPOSE he purpose for which the corporation is organized is:	2020 NW 129th Ave Un Miami, FL 33182	it 208
		
RTICLE III PURPOSE he purpose for which the corporation is organized is:		
	activity	
		75.0
		18 V S
		23
RTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Roman Mardakhaev, President	Name and Title:	
2020 NW 129th Ave Unit 208 Address		
Miami, FL 33130		
Name and Title:	Name and Title:	
Address	Address:	
	<u> </u>	
 		
Name and Title:	Name and Title:	
Address		

i: +18506176381 •

Name and Title:		Name and Title:		
Address		Address:		
ARTICLE VI	<u>REGISTERED AGENT</u> Flo rida street address (P.O. Box NOT accepta	ible) of the projetored agent is:		
-	Roman Mardakhaev	ore) of the registered agent is.		
Name:	2020 NW 129th Ave Unit 208			
Address:	Miami, FL 33182	VLIAH,		
ARTICLE VII	<u>INCORPORATOR</u>	The 23 PH 4:20 LLAHASSEE/FLORID,		
The <u>name and</u> :	address of the Incorporator is:	PH to 20		
Name:	Roman Mardakhaev			
Address:	2020 NW 129th Ave Unit 208 Miami, FL 33182	<u> </u>		
Effective date, i (If an effective		(OPTIONAL) cannot be more than five business days prior or 90 business		
	5	icable statutory filing requirements, this date will not be listed as cords.		
		process for the above stated corporation at the place designated in as registered agent and agree to act in this capacity		
	S. way	10/29/2021		
	Required Signature/Registered Age	Date Date		
	ocument and affirm that the facts stated here e Department of State constitutes a third degree	in are true. I am uware that the fulse information submitted in a efelony as provided for in s. 817.155, F.S.		
	مستيسم	10/29/2021		
Req	uired Signature/Incorporator	Date		