

P220000059722

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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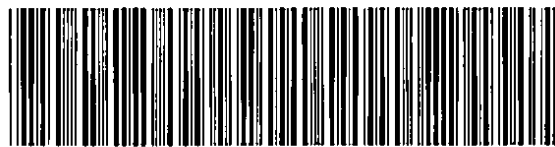
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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CLERK OF COURT
JUL 28 2022

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ATTORNEY GENERAL

COVER LETTER

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

SUBJECT: ODESSA TRANSPORTATION 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: Paulo Dukach
Name (Printed or typed)
2547 Tiny Leaf Rd
Address
Tallahassee, FL 32305
City, State & Zip
413 388 1176
Daytime Telephone number
paulo.dukach123@gmail.com
E-mail address: (to be used for future annual report notification)

2022 JUN 28 PM 12:23
D

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: Odesse Transportation Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2547 Ting Leaf Rd
Tallahassee FL 32305

The same

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Transportation

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Pavlo Dukach Name and Title: President

Address: 2547 Ting Leaf Rd Address: _____
Tallahassee, FL 32305

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

2022 JUL 28 PM 12:23
CLERK OF COURT
JUDICIAL CIRCUIT IN AND FOR
THE STATE OF FLORIDA
TALLAHASSEE COUNTY

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: Paulo Dukach
Address: 2547 Ting Leaf Rd
Tallahassee FL 32305

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Paulo Dukach
Address: 2547 Ting Leaf Rd
Tallahassee FL 32305

2022 JUN 28 PM 12:23
STATE
FLORIDA

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 7-28-2022 (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

7.28.22
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

Date

7.28.22