

P23000039091

Florida Department of State
Division of Corporations
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To:

Division of Corporations
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****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
NOCLOUD SOLUTIONS INC.**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

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2023 MAY 17 PM 3:29

DEPARTMENT OF STATE
COMMERCIAL SERVICES

DEPARTMENT OF STATE
TALLAHASSEE, FL

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Handwritten mark

ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: NOCLOUD SOLUTIONS INC.**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

8867 Morgan Landing Way8867 Morgan Landing WayBoynton Beach Florida, 33473Boynton Beach Florida, 33473**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: development and sale of CRM systems and software (IT).**ARTICLE IV SHARES**The number of shares of stock is: 200**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: Aleksej Iwanowski, PresidentName and Title: Anton Siarniazhka, Vice PresidentAddress Powstancow slaskich 89b/38Address: 8867 Morgan Landing WayWarsaw, Poland 01-355Boynton Beach Florida, 33473

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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CLERK OF COURT
JULIA HASSLER

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: Anton Siarniazhka
 Address: 8867 Morgan Landing Way
Boynton Beach Florida, 33473

ARTICLE VII INCORPORATOR

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

Name: Anton Siarniazhka
 Address: 8867 Morgan Landing Way
Boynton Beach Florida, 33473

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

05.11.2023
 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

05.11.2023
 Date

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 TALLAHASSEE, FL