Florida Department of State Division of Corporations

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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:	
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FLORIDA PROFIT/NON PROFIT CORPORATION

Milestone Auto Rentals Inc

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Certificate of Status	0
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Page Count	02
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Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF INCORPORATION

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

	<u>IPAL OFFICE</u>		
	Principal street address		Mailing address, if different is:
South Ocean Drive	Apt 404	<u>7340 187</u>	
ndale, FL 33009		Fresh Mo	7th St cudows: NY 11366
<u></u>			
CLEIII PURPO	SE that c	taa naasta	
urpose for which th	<u>SE</u> Exotic C e corporation is organized is:	ar Rentais	
		·······	
CLEUV CHARE	· e		
CLE IV SHARE	3 100 tock is:		
umber of shares of s	IUCK 15.		
CLE V INITIAI	<u> OFFICERS AND/OR DIRECTORS</u>		
	Eduard Abramov, Dir/CEO		Rafael Abramov, Dir/Manaeer
Name and Title:	Eduard Abramov, Dir/CEO	Name and Title	Rafael Abramov, Dir/Manager
Name and Title:	2030 South Ocean Drive Apt 404		Rafael Abramov, Dir/Manager
Address	2030 South Ocean Drive Apt 404	Name and Title Address:	3000 Lee Pl
Address	2030 South Ocean Drive Apt 404		·· <u></u>
Address	2030 South Ocean Drive Apt 404		3000 Lee Pl
Address	2030 South Ocean Drive Apt 404		3000 Lee Pl
Address	2030 South Ocean Drive Apt 404		3000 Lee Pl
Address	2030 South Ocean Drive Apt 404 Hallandale, FL 33009	Address:	3000 Lee Pl Bellmore, NY 11710
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Name and Title: Address Name and Title: Address	2030 South Ocean Drive Apt 404 Hallandale, FL 33009	Address: Name and Title Address: Name and Title	Bellmore, NY 11710
Name and Title: Address Name and Title: Address	2030 South Ocean Drive Apt 404 Hallandale, FL 33009	Address: Name and Title Address: Name and Title	Bellmore, NY 11710 TALLAHASSEE, FL

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Name a	and Title:	Name and Title:		
Address		Address:		
ARTICLE VI	REGISTERED AGENT			
The name and	Florida street address (P.O. Box NOT acceptat	bie) of the registered agent is:		
Name:	Eduard Abramov			
Address:	2030 South Ocean Drive Apt 404			
	33009Hallandale, FL			
ARTICI.E VII	INCORPORATOR			
The <u>name and</u>	address of the Incorporator is:			
Name:	Taylor Lolya			
Address:	25 Robert Pitt Drive, Suite 204			
	Monsey, NY 10952			
Effective date,	EFFECTIVE DATE: if other than the date of filing. date is listed, the date must be specific and o	. (OPTIONAL) cannot be more than five days prior or 90 days after the		
	te inserted in this block does not meet the appli- effective date on the Department of State's rec	cable statutory filing requirements, this date will not be listed as cords.		
. Having been na certificate, I am	imed as registered agent to accept service of pro- familiar with and accept the appointment as re	cess for the above stated corporation at the place designated in this egistered agent and agree to act in this capacity:		
By:	Eduard Abramov	N7把第二 T		
	Required Signature/Registered Agen	Date		
I submit this do	•	n are true. I am aware that the false information submitted in a		
مقن معدل		Service of the servic		
Required Signat	ure/Incorporator	Date 8/10/23 ETS		
		m · m		