

# P24000075664

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To: Division of Corporations  
Fax Number : (850)617-6381

From: Account Name : ALEXANDER ALMONTE, ESQ/I INCORPORATE LTD.  
Account Number : 120070000019  
Phone : (518)689-1212  
Fax Number : (518)432-0742

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**FLORIDA PROFIT/NON PROFIT CORPORATION**  
**IRON ART AND FORGE CORP**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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# ***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:

### ***IRON ART AND FORGE CORP***

## **ARTICLE II PRINCIPAL OFFICE**

The principal place of business and mailing address of this corporation shall be:

***11182 WILLES DON DR. S, JACKSONVILLE, FL 32246***

***Mailing Address: 11182 WILLES DON DR. S, JACKSONVILLE, FL 32246***

## **ARTICLE III PURPOSE**

*The purpose(s) for which this corporation is organized is/are to engage in any activity within the purposes for which corporations may be organized under Chapter 607 and/or Chapter 621, F.S.  
(Profit)*

## **ARTICLE IV SHARES**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: ***200 No Par Value***

## **ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and address of the initial registered agent is:

***MIKHAIL FEDOROVSKIY, 11182 WILLES DON DR. S, JACKSONVILLE, FL 32246***

## **ARTICLE VI INCORPORATOR(S)**

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

***MIKHAIL FEDOROVSKIY, President, 11182 WILLES DON DR. S, JACKSONVILLE, FL 32246***

***NATALIA FEDOROVSKAYA, Vice President, 11182 WILLES DON DR. S, JACKSONVILLE, FL 32246***

**December 16, 2024**

*Having been named as registered agent to accept service of process for the above stated corporation at the place designed in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

**s/ MIKHAIL FEDOROVSKIY**

**MIKHAIL FEDOROVSKIY**

***Registered Agent***

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JACKSONVILLE, FLORIDA

*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.*

**s/ MIKHAIL FEDOROVSKIY**  
MIKHAIL FEDOROVSKIY  
***Incorporator / President***

**s/ NATALIA FEDOROVSKAYA**  
NATALIA FEDOROVSKAYA  
***Incorporator / Vice President***

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