F1000005031

v (R€	equestor's Name)	
(Ad	Idress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone #	<i>f</i>)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name)
(Do	cument Number)	
Certified Copies	Certificates o	of Status
	_	
Special instructions to	Filing Officer:	
	Office Use Only	



300185247823

11/01/10--01034--008 **87.50

N10/1801

2010 NOV 15 PN 3:50

E Bush MOV. 1.7 2010

COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: /NA FAMILY, /NO Name of corpora	C,	
Name of corpora	tion - must include suffix	
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation "Certificate of Existence," or "Certificate of Good Sabove referenced foreign corporation to transact bus	Standing" and check are sub-	
Please return all correspondence concerning this ma	atter to the following:	
INESSA OSTROVA		
Name	of Person	
INA FAMILY, INC.		
Firm/C	Company	
370 S, ROOSEVELT AVE	,	
A	ddress	
BEXLEY, OH 43209 City/State io-landc 21@gmail. com E-mail address: (to be us		
· City/Sta	te and Zip code	
iolande 21 e gmail. com	,	
E-mail address: (to be us	ed for future annual report n	otification)
For further information concerning this matter, please		
Name of Person at (67)	4 , 238-3155	
Name of Person Ar	ea Code & Daytime Telepho	one Number
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING AI New Filing Sec Division of Co P.O. Box 6327 Tallahassee, Fl	ction prorations
Enclosed is a check for the following amount:		
□ \$70.00 Filing Fee □ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy



RECEIVED

10 NOV 15 AHII: 21

FLORIDA DEPARTMENT OF STATE SECRETARY OF STATE TALLAHASSEE, FLORIDA Division of Corporations

November 4, 2010

INESSA OSTROVA 370 S ROOSEVELT AVE BEXLEY, OH 43209

SUBJECT: INA FAMILY, INC. Ref. Number: W10000051801

We have received your document for INA FAMILY, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6928.

Tim Burch Regulatory Specialist II

Letter Number: 710A00026031

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT **BUSINESS IN FLORIDA**

	EWITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMI REIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA		
TALA	EAMILY INC	29	22.0
(Enter name of co	orporation; must include "INCORPORATED," "COMPANY," "CORPORATION." orp," "Inc," "Co," or "Corp.")	SETANY OF S	- 1
(If name unavaila	able in Florida, enter alternate corporate name adopted for the purpose of transacting busines		
2. OH10	7 26-3775296	ALE ALE	
(State or country t	Ounder the law of which it is incorporated) 3. 26-3775296 (FEI number, if applicable)		
4. 11-17	7-2008 5. PERPETUAL (Duration: Year corp. will cease to exist or		
		"perpetual")	
6. N/A			
	(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)		
7. 370 S.	ROOSEVELT AVE. BEXLEY, OH 43209		
	(Principal office address)		
	(Current mailing address)		
8. (Purpose(s)) of corporation authorized in home state or country to be carried out in state of Florida)		
	·		
9. Name and street	t address of Florida registered agent: (P.O. Box NOT acceptable)		
Name:	INESSA OSTROVA		
Office Address:	1560 SAWGRASS CORPORATE PKWY, 4TH FLOOR		
	FORT LAUDERDALE , Florida 33323		
	(City) (Zip code)		
designated in this a further agree to co	ent's acceptance: ed as registered agent and to accept service of process for the above stated corpora application, I hereby accept the appointment as registered agent and agree to act amply with the provisions of all statutes relative to the proper and complete perfor with and accept the obligations of my position as registered agent.	in this capacity.	i es
 -	Watrova		
	(Registered agent's signature)	₩.	
11. Attached is a co	ertificate of existence duly authenticated, not more than 90 days prior to delivery of	this application t	0

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: N/A Vice Chairman: N/A-Address: _ Director: N/A Address: Director: _____N/A **B. OFFICERS** President: __INESSA OSTROVA Address: 370 S. ROOSEVELT AVE. BEXLEY, OH 43209 Vice President: N/A Address:

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Wobrova

(Signature of Director or Officer listed in number 12 of the application)

14. ____ INESSA OSTROVA / PRESIDENT

(Typed or printed name and capacity of person signing application)

UNITED STATES OF AMERICA STATE OF OHIO OFFICE OF THE SECRETARY OF STATE

I, Jennifer Brunner, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show INA FAMILY INC., an Ohio Corporation, Charter No. 1819074, having its principal location in Bexley, County of Franklin, was incorporated on November 17, 2008, and is currently in GOOD STANDING upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 22nd day of October, A.D. 2010.

Ohio Secretary of State

Validation Number: 201029500249