

P22000003424  
Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850)617-6381

From: Account Name : ALEXANDER ALMONTE, ESQ/I INCORPORATE LTD.  
Account Number : I20070000019  
Phone : (518)689-1212  
Fax Number : (518)432-0742

\*\*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  
CHELSEA BUSINESS CONSULTING INC

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

2022 JAN 14 AM 9:47

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2021 JAN 14 AM 1:20

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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: CHELSEA BUSINESS CONSULTING INC

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

480 NE 31ST ST, UNIT 3602

480 NE 31ST ST, UNIT 3602

MIAMI, FL 33137

MIAMI, FL 33137

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: ALL LEGAL PURPOSES

**ARTICLE IV SHARES**

The number of shares of stock is: 200

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: ILYA BYKOV  
Address: PRESIDENT  
480 NE 31ST ST, UNIT 3602  
MIAMI, FL 33137

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
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Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
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Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
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Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
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STATE DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

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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: ILYA BYKOV  
 Address: 480 NE 31ST ST, UNIT 3602  
MIAMI, FL 33137

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**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: ILYA BYKOV  
 Address: 480 NE 31ST ST, UNIT 3602  
MIAMI, FL 33137

**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*

s/ ILYA BYKOV 01/14/2022  
 Required Signature/Registered Agent 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.*

s/ ILYA BYKOV 01/14/2022  
 Required Signature/Incorporator Date