F22000003186

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(Address)					
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PICK-UP WAIT MAIL					
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MAY 20 2022 K. Brumbley

COVER LETTER

TO: Registration Section Division of Corporation					
SUBJECT: THE NOBO	DDY CO. INC.				
зовјест	Name of corporation	- must include suffix			
Dear Sir or Madam:					
"Certificate of Existence,"	n by Foreign Corporation for . " or "Certificate of Good Stan corporation to transact busine.	ding" and check are subt	t Business in Florida," mitted to register the		
Please return all correspon	ndence concerning this matter	to the following:			
JUSTIN OLTZ-GREEN					
	Name of	Person			
THE NOBODY CO. INC.					
	Firm/Com	pany			
130 RINCON DRIVE					
	Addre	ess			
ST AUGUSTINE, FL 3209	5				
	City/State a	nd Zip code			
justin@thenobody.co					
	E-mail address: (to be used f	or future annual report n	otification)		
For further information co	oncerning this matter, please o	all:			
JUSTIN OLTZ-GREEN	at (310	487-3903	7-3903		
Name of Person	Area Cod	e Daytime Telepl	hone Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		Registration S Division of Co P.O. Box 6327	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Enclosed is a check for the Please make check payable ☐ \$70.00 Filing Fee	to: FLORIDA DEPARTMENT	OF STATE \$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certificate of Status & Certified Copy		

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

"Inc.," "Co.," "C	orp," "Inc," "Co," or "Corp.")				
Nobody Co. Inc					
(If name unavails	able in Florida, enter alternate corporate name	adopted for the purpose of transactin	g business in Florida)		
CALIFORNIA	IFORNIA3				
	y under the law of which it is incorporated)	(FEI number, if ap	plicable)		
12/17/2020	5.				
	of incorporation)	(Date of duration, if other than perpetual)			
·	(5				
	(SEE SECTIONS 607.1501 & 607.15	n Florida, if prior to registration) 502, F.S., to determine penalty liabili	ty)		
130 RINCON DE	RIVE, ST. AUGUSTINE, FL 32095				
	(Principal offi	ice street address)			
	(Current mailir	ng address, if different)			
		a a vom	2022		
. Name and stree	et address of Florida registered agent: (P.C	J. Box NOT acceptable)	. I		
Name:	Earl Oltz	<u> </u>	Fil. 2022 HAY 20		
ffice Address:	130 RINCON DRIVE		/		
	ST. AUGUSTINE	. Florida	PH 2:		
	(City)	(Zip code)	04		
			*		
	ent's acceptance: ned as registered agent and to accept servi	iva of nearacs for the above states	d cornoration at the plac		
		ce of processing in the above shale.	en.parantin		
aving been nam	application, I hereby accept the appoint	nent as registered agent and agre	ee to act in this capacity		
laving been names esignated in this orther agree to c	application, I hereby accept the appoint omply with the provisions of all statutes r	elative to the proper and complete	ee to act in this capacity te performance of my di		
esignated in this urther agree to c	application, I hereby accept the appointm	elative to the proper and complete	ee to act in this capacity te performance of my di		
laving been nam esignated in this urther agree to c	application, I hereby accept the appoint omply with the provisions of all statutes r	elative to the proper and complete	ee to act in this capacity te performance of my di		
aving been namesignated in this esignated in this	application, I hereby accept the appoint omply with the provisions of all statutes r	elative to the proper and complete	ee to act in this capacity te performance of my di		
aving been namesignated in this arther agree to c	application, I hereby accept the appoint omply with the provisions of all statutes r	relative to the proper and completes ition as registered agent.	ee to act in this capacity te performance of my di		

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

under the law of which it is incorporated.

A. DIRECTORS							
■ Chairman	Name:	□Chairman	Name:				
□Vice Chairman	Address:	□Vice Chairman	Address:				
Director	ST. AUGUSTINE, FL 32095	□Director		***			
■ President		□President					
□Vice President		□Vice President					
□Secretary	□Treasurer	□Secretary	<u> </u>	freasurer			
Other		□Other		Other			
□Chairman	Name:	□Chairman	Name:				
□Vice Chairman	Address:	□Vice Chairman	Address:				
□Director		□Director					
□President		□President					
□Vice President		□Vice President					
□Secretary	□Treasurer	☐ Secretary	<u>_</u> 1	Freasurer			
□Other	Other	Other		Other			
□Chairman	Name:	□Chairman	Name:				
□Vice Chairman	Address:	□Vice Chairman	Address:				
□Director		□Director					
□President		□President					
□Vice President		□Vice President					
□Secretary	□Treasurer	□Secretary	<u> </u>	Freasurer			
□Other	Other	□Other		Other			
Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form. Justin Oltz-Green 12. Justin Oltz-Green May 3, 2022 16 07 GMT-71							

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that 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.

State of California

Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

THE NOBODY CO, INC.

FILE NUMBER:

C4672958

FORMATION DATE:

12/17/2020

TYPE:

DOMESTIC CORPORATION

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, SHIRLEY N. WEBER, PH.D. Secretary of State of the State of California hereby certify:

The entity is authorized to exercise all of its powers, rights and privileges in California.

This certificate relates to the status of the entity on the Secretary of State's records and does not reflect documents that are pending review or other events that may affect status.

No information is available from this office regarding the financial condition, status of licenses, if any, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of February 24, 2022.

Shirley N. Weber, Ph.D. Secretary of State