# F2400004495

(Requestor's Name)
(Address)
(7.00.000)
(Address)
(City/State/Zip/Phone #)
(,,,,,,,,,
PICK-UP WAIT MAIL
(Business Entity Name)
, ,
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer.





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### **COVER LETTER**

TO: Registration Section Division of Corpora				
SUBJECT: SellWithOtto.	nc.			
	Name of corporation -	must include suffix		
Dear Sir or Madam:				
"Certificate of Existence," o	y Foreign Corporation for A r "Certificate of Good Stand poration to transact business	ing" and check are submit		
Please return all corresponde	ence concerning this matter t	o the following:		
Holden Bruce				
·	Name of P	erson		
SellWithOtto, Inc.				
<u> </u>	Firm/Comp	any		
202 W Curtis Street				
	Addres	is s		
Tampa, FL 33603				
	City/State and	d Zip code		
h.bruce@sellwithotto.ai				
E	-mail address: (to be used fo	r future annual report noti	fication)	
For further information cond	erning this matter, please ca	11:		
Holden BRUCE	781	) 296-7597  Daytime Telephone Number		
Name of Person	Area Code	Daytime Telephor	ne Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		Registration Sect Division of Corp P.O. Box 6327	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
	FLORIDA DEPARTMENT		\$87.50 Filing Fee, Certificate of Status Certified Cony	

#### -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.

SellWithOtto, I	nc.			
	corporation; must include "INCORPORATED Corp," "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATION,"		
SellWithOtto.ai				
(If name unavai	lable in Florida, enter alternate corporate name	adopted for the purpose of transacting b	usiness in Florida)	
2. Delaware, Unit	ed States of America	38-4194777		
(State or country under the law of which it is incorporated)		(FEI number, if applicable)		
4. September 14, 2	2021			
(Date	e of incorporation)	(Date of duration, if other than	(Date of duration, if other than perpetual)	
6.				
7. <sup>202</sup> W Curtis Str	(Date first transacted business i (SEE SECTIONS 607.1501 & 607.1	in Florida, if prior to registration) 502. F.S., to determine penalty liability)		
		fice <u>street</u> address)		
	(Current maili	ng address, if different)		
8. Name and stre  Name:  Office Address:	et address of Florida registered agent: (P.) Holden Bruce 202 W Curtis Street	O. Box <u>NOT</u> acceptable)	2014 AUS 22 F	
	Tampa	, Florida	1 L: 07	
	(City)	(Zip code)	07	

#### 9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to 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.

A. DIRECTORS  Chairman	Holden Bruce	□Chairman	Name:			
	Address: 202 W Curtis Street	□ Vice Chairman				
□Director		☐ Director		-		
□President	Tampa, FL	□President				
□Vice President	33603	□ Vice President				
	□Treasurer	☐ Secretary				
□ Secretary  CEO  Other		□ Secretary		Other		
□Chairman	Name:	□Chairman	Name:			
□Vice Chairman	Address:	□ Vice Chairman	Address:			
□Director		□Director				
□President		☐ President				
□Vice President		□Vice President				
Secretary	□Treasurer	☐ Secretary		□Treasurer		
Other	Other	Other		Other		
□ Chairman	Name:	□ Chairman	Name:			
□ Vice Chairman	Address:	□Vice Chairman	Address:			
□Director	<del>-</del>	□ Director				
□President		□President				
□ Vice President		□Vice President				
☐ Secretary	□Treasurer	□Secretary		□Treasurer		
Other	Other	□Other		□Other		
individuals may be	Use an attachment to report more than six (6). The added to the index when filing your Florida Dep	partment of State Annual Re	port form.			
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.

Holden Bruce, CEO & Registered Agent

## Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "SELLWITHOTTO, INC." IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS

OF THIS OFFICE SHOW, AS OF THE THIRD DAY OF JULY, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SELLWITHOTTO, INC." WAS INCORPORATED ON THE FOURTEENTH DAY OF SEPTEMBER, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

TANKS OF THE PARTY OF THE PARTY

Authentication: 203854428

Date: 07-03-24

6233773 8300 SR# 20243049451