## F24000005201

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
W24 000117160					

Office Use Only



500434635255

08/14/24--01029--015 \*+70.00

2024 SEP 39 PM 6: 30



August 19, 2024

DIANA FOX 1508 BAY ROAD N206 MIAMI BEACH, FL 33139 US

SUBJECT: ODYSSEY GAMING XYZ INC.

Ref. Number: W24000117160

We have received your document for ODYSSEY GAMING XYZ INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

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) 245-6051.

Andrea Andrews Regulatory Specialist II

Letter Number: 524A00018492

RECEIVED

SEP 3 n 2024

July 31, 2024

To: Registration Section

**Division of Corporations** 

P.O Box 6327

Tallahassee, FL 323124

Re: Odyssey Gaming XYZ Inc

1508 Bay Road N206

Miami Beach FL, 33139

Dear Sir/Madam,

I, Diana Fox the owner of Odyssey Gaming XYZ Inc, wish to inform you that I will not be reinstating the former Florida business (P24000046361) and it has already been dissolved through Florida's online portal. The initial registration was incorrectly done as a Profit Corporation instead of a Foreign Corporation.

Enclosed, please find the "Application by Foreign Corporation for Authorization to Transact Business in Florida" form. I am submitting this form to register the foreign corporation in Florida under the same name, Odyssey Gaming XYZ Inc.

Thank you,

Diana Fox

## **COVER LETTER**

	stration Section sion of Corporations					
SUBJECT:	ODYSSEY GAMING XYZ IN	₹C.				
Name of corporation - must include suffix						
Dear Sir or N	Лаdam:					
"Certificate	I "Application by Foreign Cor of Existence," or "Certificate of need foreign corporation to tra	of Good Stand	ing" and check are submitte	siness in Florida," d to register the		
Please return	all correspondence concernit	ng this matter t	o the following:			
Diana Fox						
		Name of P	erson			
		Firm/Comp	pany			
1508 Bay Ro	ad N206					
	<u> </u>	Addres	SS			
Miami Beach	, Florida 33139					
		City/State an	d Zip code			
info@ogcpaf						
	E-mail address	(to be used fo	or future annual report notifi	cation)		
For further i	nformation concerning this ma	atter, please ca	ill:			
Oleg Gorshk	ev ever	718 788-1327				
Nai	ne of Person	Area Code	Daytime Telephone	Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			Registration Section Division of Corporate P.O. Box 6327	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Enclosed is Please make \$70.00 F	a check for the following amount of the check payable to: FLORIDA DE iling Fee	EPARTMENT g Fee &	OF STATE \$78.75 Filing Fee & □ Certified Copy	\$87.50 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.

	MING XYZ INC.  orporation: must include "INCORPORATED,"	"COMPANY." "CORPORATION."			
	orp," "Inc," "Co," or "Corp.")				
	<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>				
,	able in Florida, enter alternate corporate name a	•	ess in Florida)		
DELAWARE	y under the law of which it is incorporated)	-4196891			
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable	e)		
10/31/2023	5.	(Date of duration, if other than pe			
·	of incorporation)	(Date of duration, if other than pe	(Date of duration, if other than perpetual)		
08/01/2024					
		Florida, if prior to registration) 02, F.S., to determine penalty liability)			
508 Bay Road N	206, Miami Beach, FL 33139				
		ce street address)			
	(Current mailin	g address, if different)	<del></del>		
			2		
Name and stree	t address of Florida registered agent: (P.O	. Box NOT acceptable)	24 S		
Name:	Diana Fox		2024 SEP 30		
	1508 Bay Road N206		30		
fice Address:	1300 Buy Road 1200		72		
	Miami Beach	, Florida			
	(City)	(Zip code)	ಟ		
Decistored na	····•·		0		
	ent's acceptance: wed as registered agent and to accept service	ce of process for the above stated corpo	oration at the pla		
signated in this	application, I hereby accept the appointm	ient as registered agent and agree to a	ct in this capacit		
	omply with the provisions of all statutes re with and accept the obligations of my pos		ormance of my a		
u i am jamutar	with and accept the obligations of my pos	mion as registered agent.			
		x . /			
	L) C				
	(Registered agent's si	enature)			

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	Name: Diana Fox	□Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
□Director	Miami Beach, FL 33139	□Director		
President		□President		
□Vice President		□Vice President		
□ Secretary	□Treasurer	☐ Secretary		□Treasurer
□Other		□Other		□Other
□Chairman □Vice Chairman □Director	Name: Jonathan Doran  Name: 2177 Lincoln Ave. Apt 5  Address: Montreal, QC. H3H1J2 CA	□Chairman □Vice Chairman □Director		
■ President		□President		
□Vice President		□Vice President		
Secretary	☐Treasurer	☐ Secretary		☐Treasurer
□Other	□Other	Other	<del></del>	□Other
□Chairman □Vice Chairman □Director	Name: Jonathan Teplitsky  Address: 1508 Bay Road, Apt N206  Miami Beach, FL 33139	□Chairman □Vice Chairman □Director		
■ President		□President		
□Vice President		□Vice President		
☐ Secretary	☐Treasurer	□Secretary		□Treasurer
Other	□Other	□Other		□Other
12The officer or direction	Use an attachment to report more than six (6). The attack added to the index when filing your Florida Department Signature of Director of Color signing this document (and who is listed in number alse information submitted in a document to the Department of the Dep	nt of State Annual Re r Officer 11 above) affirms th	port form.	herein are true and that he or

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

Page 1



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

DELAWARE, DO HEREBY CERTIFY "ODYSSEY GAMING XYZ 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 NINTH DAY OF SEPTEMBER, 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 "ODYSSEY GAMING

XYZ INC." WAS INCORPORATED ON THE THIRTY-FIRST DAY OF OCTOBER, A.D.

2023.

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

A STATE OF THE STA

Authentication: 204347658

Jeffrey W. Bullock, Secretary of State

Date: 09-09-24