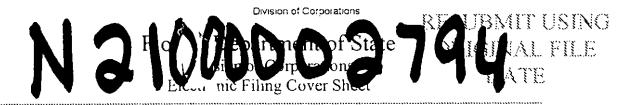
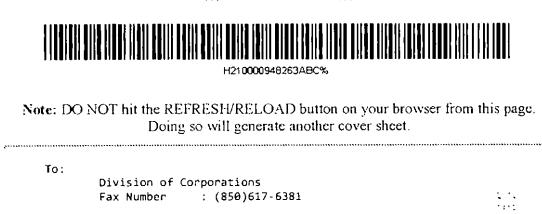
3/9/2021



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

3/9/2021 8:42:31 AM PAGE

(((H21000094826 3)))



From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I20000000195 Phone : (850)521-0821 Fax Number : (850)558-1515

**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 FLOW APP INC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

Electronic Filing Menu Corporate Filing Menu

Help

FLORIDA DEPARTMENT OF STATE Division of Corporations

March 5, 2021

CSC

SUBJECT: FLOW APP INC Ref. Number: W21000030755

We have received your document for FLOW APP INC. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document must have original signatures.

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) 245-6052.

Letter Number: 921A00004767

Carlos E Rico Regulatory Specialist III

2621 ib.K - 9 Pri 3 · 23

CSC TRANS01 3/9/2021 8:42:31 AM PAGE 3/005 Fax Server

2/26/2021 3:28 PM FROM: Staples

TO: +13026365454

P. 1

COVER LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for: \$70.00	SUBJECT: FLOW APP				
Filing Fee Filing Fee & Filing Fee & Filing Fee, Certificate of Status FROM: M. Marcy Drafts - Miller Name (Printed or typed) Local Sussman Place Apt. 30 Address Tampa, Florida, 33615 City, State & Zip		(PROPOSED CORPO	ORATE NAME - <u>MUST IN</u>	CLUDE SUFFIX)	_
From: Marrie (Printed or typed) Filing Fee Filing Fee Certificate of Status FROM: Marrie (Printed or typed) Tampa, Florida, 33615 City, State & Zip					
Filing Fee Filing Fee & Certificate of Status From: M. Marcy Drafts - Willer Name (Printed or typed) Address Tampa, Fluida, 33615 City. State & Zip	inclosed is an original a	nd one (1) copy of the Arti	icles of Incorporation and	a check for :	
FROM: M. Marcy Drafts - Miller Name (Printed or typed) 6602 Sussman Place Apt. 30 Address Tampa, Florida, 33615 City. State & Zip		Filing Fee & Certificate of	Filing Fee	Filing Fee, Certified Copy	
Loboz Sussman Place Apt. 30 Address Tampa, Florida, 33615 Ciry. State & Zip			ADDITIONAL CO	PY REQUIRED	
	FROM:		isman Plac		•
		Tampa, F	locida, 336 City. State & Zip	15	
014-483-Z935 Daytime Telephone number		614-48.	3 - 2935	<u>-</u>	[· ·

NOTE: Please provide the original and one copy of the articles.

CSC TRANS01 3/9/2021 8:42:31 AM PAGE 4/005 Fax Server

2/26/2021 3:28 PM FROM: Staples

TO: +13026365454 P. 2

ARTICLES OF INCORPORATION

In compliance with Chapter 617, F.S., (Not for Profit)

	PRINCIPAL OFFICE Principal street address: 22 Sussman Place, Apt 305	Mailing address, if different is:
Ta	mpa, FL 33615	
t <i>TICLE I</i> e purpose	IF PURPOSE for which the corporation is organized is:afe platform for users to post content fre	to provide a safe patform for meely without discrimination.
,		
##* ^* # ***** ** * ****		
		nner in which the directors are elected and appointed:
	ected by direct	nner in which the directors are elected and appointed: Or and President.
El RTICLE 1	ected by direct	oner in which the directors are elected and appointed: OF and President. Crors
CI RTICLE I	ected by direct	nner in which the directors are elected and appointed: OF and President. Crors Ctor Name and Title:
CI RTICLE I	ECTEC by direct INITIAL OFFICERS AND/OR DIRECT itle: M Marcy Drafts Miller, President/Direct	oner in which the directors are elected and appointed: OF and President. Crors
RTICLE V ame and T ddress	ECHCO by direct INITIAL OFFICERS AND/OR DIRECT INITIAL OFFICERS AND/OR DIRECT M Marcy Drafts Miller, President/Direct 6602 Sussman Place, Apt 305 Tampa, FL 33615	nner in which the directors are elected and appointed: OF and President. CTORS ctor Name and Title: Address:
RTICLE V ame and T ddress	ECHCO by direct INITIAL OFFICERS AND/OR DIRECT INITIAL OFFICERS AND/OR DIRECT M Marcy Drafts Miller, President/Direct 6602 Sussman Place, Apt 305 Tampa, FL 33615	nner in which the directors are elected and appointed: OF and President. CTORS ctor Name and Title: Address:
RTICLE V ame and T ddress	ECHCO by direct INITIAL OFFICERS AND/OR DIRECT itle: M Marcy Drafts Miller, President/Direct 6602 Sussman Place, Apt 305 Tampa, FL 33615 Kerly Marie Carmelus, Direct itle: Kerly Marie Carmelus, Direct	nner in which the directors are elected and appointed: OF and President. CTORS ctor Name and Title: Address:
RTICLE V ame and T ddress ame and T ddress	*** INITIAL OFFICERS AND/OR DIRECT INITIAL OFFICERS AND OR DI	nner in which the directors are elected and appointed: OF and President. CTORS ctor Name and Title: Address: Address:
RTICLE V ame and T ddress	*** INITIAL OFFICERS AND/OR DIRECT INITIAL OFFICERS AND OR DI	nner in which the directors are elected and appointed: OF and President. CTORS ctor Name and Title: Address:

			•		
Address		Name and Title:			
		Address:			
					
Name and Title:		Name and Title:			
					
	REGISTERED AGENT orida street address (P.O. Box NOT acc	centable) of the mois	tered agent is:		
Name:	Corporation Service Company				
Address:	1202 Hays Street				2021 1577
riumitār,	Tallahassee, FL 32301				
					2
	INCORPORATOR dress of the Incorporator is:				<u> </u>
Name:	M Marcy Drafts Miller			<u>:</u>	ယ္
Address:	6602 Sussman Place, Apt 305			;~ ;	25
Madicas.	Tainpa, FL 33615				
ARTICI E VIII	EFFECTIVE DATE:			•	
Effective date, if o	other than the date of filing:ate is listed, the date must be specific:		(OPTIONAL)	lasa etc.	the Cline