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TRANSMITTAL LETTER

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

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-09/11/00--01079--010
*****87.50 *****87.50

SUBJECT: OX4, INC
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00 Filing Fee
☐ \$78.75 Filing Fee
& Certificate of Status

☐ \$78.75 Filing Fee
& Certified Copy
☒ \$87.50 Filing Fee,
Certified Copy
& Certificate of
Status
ADDITIONAL COPY REQUIRED

FROM: OX4, INC
Name (Printed or typed)
3912 West South Ave
Address
TAMPA, FLORIDA 33614
City, State & Zip
813/872-7836
Daytime Telephone number

FILED
00 SEP 11 PM 4:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

9-13
WC

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED
00 SEP 11 PM 4:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be: OX4, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: 3912 West South Ave.
TAMPA, FLORIDA 33614

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es): John J. OLIVEIRA
7965 120th St N.
Seminole, FL 33772

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is: John J. OLIVEIRA
3912 West South Ave
Tampa, FL 33614

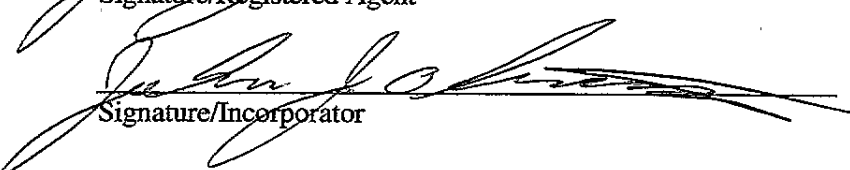
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is: John J. OLIVEIRA
7965 120th St N.
Seminole, FL 33772

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


Signature/Registered Agent

AUGUST 23, 2000
Date


Signature/Incorporator

AUGUST 23, 2000
Date