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SECRETARY OF STATE

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TRANSMITTAL LETTER

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

SUBJECT: OZ ADV	VENTUREWEAR INC.		
	(PROPOSED CORPORA	TE NAME – MUST INCL	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	a check for:
□ \$70.00	□ \$78.75	☑ \$78.75	□ \$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
	& Certificate of Status	& Certified Copy	Certified Copy
]	& Certificate o
			Status
		ADDITIONAL CO	PY REQUIRED
FROM: CH	ERYL GLASSCOCK		•
	Name	(Printed or typed)	
<u>.</u>	41 HOPE STREET		
		Address	- -
	ST. AUGUSTINE, FL 32084		
	City	, State & Zip	
	004 007 0400		
.	904-827-0188	Celephone number	
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NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

. . .

The name of the corporation shall be:

OZ ADVENTUREWEAR INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 1080 NORTH PONCE DE LEON BLVD, ST. AUGUSTINE, FLORIDA 32084

ARTICLE III **PURPOȘE**

The purpose for which the corporation is organized is: RETAIL SOUVENIER SALES, SCREEN PRINTING, AND ANY OTHER LEGAL ACTIVITY.

ARTICLE IV SHARES

The number of shares of stock is: 8000

INITIAL OFFICERS AND/OR DIRECTORS ARTICLE V_

List name(s), address(es) and specific title(s):

TARA AUSILI, PRESIDENT, 4535 CALVIN STREET, HASTINGS, FL 32145 CHERYL GLASSCOCK, SECRETARY, TREASURER, 41 HOPE ST. ST. AUGUSTINE, FL 32084

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

TARA AUSILI, 4535 CALVIN STREET, HASTINGS, FL 32145

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

CHERYL GLASSCOCK, 41 HOPE STREET, ST. AUGUSTINE, FL. 32084

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 jumiliar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Incorporator