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(City/State/Zip/Phone #)

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COVER LETTER

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

SUBJECT: **OX ONE CORP**

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: **MICHAEL HERMAN**

Name (Printed or typed)

2011 SW 70 AVE A-12

Address

DAVIE, FL

City, State & Zip

754 368-2204

Daytime Telephone number

MHERMAN443@AOL.COM

E-mail address: (to be used for future annual report notification)

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: OX ONE CORP

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2011 SW 70 AVE A-12

DAVIE, FLORIDA

33317

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: THIS CORPATION IS BEING ORGANIZED
FOR THE PURPOSE OF TRANSACTING ANY AND ALL LAWFUL BUSINESS
PERMITTED UNDER THE LAWS OF THE STATE OF FLORIDA AND THE LAWS
OF THE UNITED STATES.

ARTICLE IV SHARES

The number of shares of stock is: 7,500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MICHAEL HERMAN, PRES

Address 2012 SW 70 AVE A-12

DAVIE, FLORIDA

33317

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

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(cont.)

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: MICHAEL HERMAN
Address: 2011 SW 70 AVE A-12
DAVIE, FLORIDA, 33317

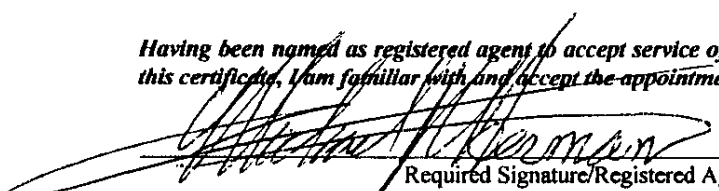
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: MICHAEL HERMAN
Address: 2011 SW 70 AVE A-12
DAVIE, FLORIDA, 33317

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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



Required Signature/Registered Agent

11/15/2013

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the 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.



Required Signature/Incorporator

11/15/2013

Date

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Name and Title: _____

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Address: _____

DAVIE, FLORIDA

33317

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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(conti.)

Name and Title: _____ Name and Title: _____
Address _____ Address: _____

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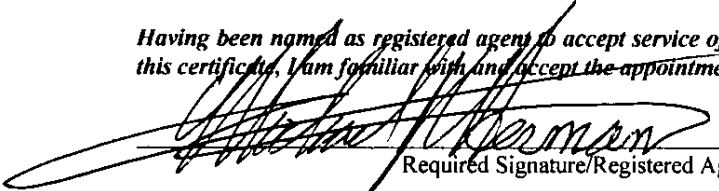
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Address: 2011 SW 70 AVE A-12
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