

PI6000033993

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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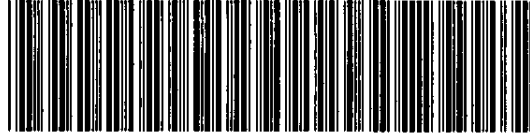
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
16 APR 11 AM 10:20

COVER LETTER

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

16 APR 11 AM 10:20

RECEIVED
DIVISION OF CORPORATIONS

SUBJECT: AllToVR inc.

(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: Rue LaRue
Name (Printed or typed)
2330 Ersoff Blvd. NE
Address
Palm Bay, Fl. 32905
City, State & Zip
(321) 298-5658
Daytime Telephone number
ruelarue@internationalsciencecenter.org
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: AllToVR inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2330 Ersoff Blvd. NE

Palm Bay, Fl. 32905

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: any and all lawful business

ARTICLE IV SHARES

The number of shares of stock is: 10,000,000

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CLERK OF DISTRICT COURT
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ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Mr. Rue LaRue / CEO

Name and Title: _____

Address 2330 Ersoff Blvd. NE

Address: _____

Palm Bay, Fl. 32905

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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: Mr. Rue LaRue
Address: 2330 Ersoff Blvd. NE
Palm Bay, Fl. 32905

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Mr. Rue LaRue
Address: 2330 Ersoff Blvd. NE
Palm Bay, Fl. 32905

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STATE DEPT OF STATE
DIVISION OF CORPORATIONS
16 APR 11 AM 10:20

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Rue LaRue

Required Signature/Registered Agent

4-7-2016

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.

Rue LaRue

Required Signature/Incorporator

4-7-2016

Date