

1/4/2017

Division of Corporations

Florida Department of State

Division of Corporations
Section: Filing Cover Sheet

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.

((H17000003309 3)))



H170000033093ABCK

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : USACORP INC.
Account Number : I20130000019
Phone : (718)362-4789
Fax Number : (718)408-2550

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: cpa@jacobocpa.com

**FLORIDA PROFIT/NON PROFIT CORPORATION
XIOBRY INC.**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

JAN 10 2017

T. SCOTT

PLEASE SEE REJECTION LETTER ON NEXT PAGE. THIS

WAS REJECTED IN ERROR AS IT WAS A 2 IN 1 FILING

Electronic Filing Menu

Corporate Filing Menu

Help

WITH THE WITHDRAWAL SO NAME WAS AVAILABLE

AFTER WITHDRAWING. PLS FILE ASAP!!!!!!!!!!



January 6, 2017

FLORIDA DEPARTMENT OF STATE
Division of Corporations

USACORP INC.

SUBJECT: ZIOBRY INC.
REF: W17000001129

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is F14000001661.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tim Burch
Regulatory Specialist III

FAX Aud. #: H17000003309
Letter Number: 617A00000344

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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: XIOBRY INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2334 Florida Dr.,

Deltona, FL 32738

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: 200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Isaac Archibald, President

Name and Title: _____

Address 2334 Florida Dr.,

Address: _____

Deltona, FL 32738

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

17 JAN -9 PM12:51
DEPT OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

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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: Isaac Archibald
Address: 2334 Florida Dr.
Deltona, FL 32738

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Isaac Archibald
Address: 2334 Florida Dr.
Deltona, FL 32738

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

<u>/s/ Isaac Archibald</u>	<u>1/3/17</u>
Required Signature/Registered Agent	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.

<u>/s/ Isaac Archibald</u>	<u>1/3/17</u>
Required Signature/Incorporator	Date

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