## Division Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LEGALZOOM.COM INC.

Account Number : 12001000062 Phone : (323) 962-8600

Fax Number : (323)962-3889

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

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### FLORIDA PROFIT/NON PROFIT CORPORATION

Otborx, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	06
Estimated Charge	\$78.75

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10/31/2017

#### **COVER LETTER**

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

1,0

SUBJECT: Otborx,	Inc.				
SOBSECT.	(PROPOSED CORPORA	TE NAME - MUST INCL	UDE SUFFIX)		
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	d 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 CO	PY REQUIRED		
FROM:		nc. e (Printed or typed)	<del></del>		
101	N. Brand Blvd., 10th Floor	Address			
Gle	Glendale, CA 91203				
	City	, State & Zip			
323	-962-8600 ext. 7625				
<del></del> -	Daytime 1	clephone number			
onli	nefitings@Legatzoom.com				
<del></del>	E-mail address: (to be use	d for future annual report i	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)

Glencoe Dr	NCIPAL OFFICE Principal street address		Mailing address, if different is:	
le Terrace, FL	33617			
CLE III PUR Irpose for whic	RPOSE the the corporation is organized is:	all lawful purposes		
			·	17 (
TLE IV SHA	<u>IRES</u> 101,000,000 of stock is:		· · ·	•
	<del> </del>			
	TIAL OFFICERS AND/OR DIRECTORS Zenobia Bouver, D		Constance Bowen, T	15
CLE V INI	itle: Zenobia Bowen, P  6632 Glencoe Dr	Nume and Title: Address:	6632 Glencoe Dr	
<i>LE V INI</i> Name and T	itle: 6632 Glencor Dr	Nume and Title:		
Name and T Address	itle: Zenobia Bowen, P  6632 Glencoe Dr  Temple Terrace, FL 33617	Nume and Title:	6632 Glencoe Dr Temple Terrace, FL 3361	
Name and T Address	itle: Zenobia Bowen, P  6632 Glencoe Dr  Temple Terrace, FL 33617  tle: Judith Rose, S  6632 Glencoe Dr	Name and Title: Address: Name and Title:	6632 Glencoe Dr Temple Terrace, FL 3361	
Name and T Address Name and Ti	itle: Judith Rose, S	Nume and Title: Address: Name and Title: Address: Address:	6632 Glencoe Dr Temple Terrace, FL 3361 Armand Bowen, D	7
Name and T Address Name and Ti	Itle: Judith Rose, S 6632 Glencoe Dr Temple Terrace, FL 33617 Temple Terrace, FL 33617	Name and Title: Address: Name and Title: Address: Address:	6632 Glencoe Dr Temple Terrace, FL 3361 Armand Bowen, D 6632 Glencoe Dr Temple Terrace, FL 3361	7

Name a	nd Title:	Name and Title:
Addres	s	Address:
		_
ARTICLE VI	REGISTERED AGENT	No Colon consistence of mount in
	Florida street address (P.O. Box NOT acceptable) United States Corporation Agents, Inc.	) of the registered agent is.
Name: Address:	13302 Winding Oak Court, Suite A	<del>-</del>
1100.05	Tampa, FL 33612	
		<del>-</del>
AUTICLEVII	INCORPORATOR	
The name and	address of the Incorporator is:	<u>.</u> .
Name:	Cheyenne Moseley, Legalzoom.com, Inc.	<u> </u>
Address:	101 N. Brand Blvd., 11th Floor	· · · · · · · · · · · · · · · · · · ·
	Glendale, CA 91203	<u> </u>
Effective date	EFFECTIVE DATE: if other than the date of filing: date is listed, the date must be specific and can filing.)	. (OPTIONAL) nnot be more than five business days prior or 90 business
Note: If the dathe document's	te inserted in this block does not meet the applicate effective date on the Department of State's record	ble statutory filing requirements, this date will not be listed a ds.
Having been nothing this certificate,	amed as registered agent to accept service of proc I am familiar with and accept the appointment as	cess for the above stated corporation at the place designated registered agent and agree to act in this capacity
	Chy	10 3 /17
	Required Signature/Registered Agent	Date
I submit this d	ocument and affirm that the facts stated herein a e Department of State constitutes a third degree fe	are true. I am aware that the false information submitted in elany as provided for in \$.817.155, F.S.
	(M	10/31/1-
Rec	uired Signature/Incorporator	Date

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# Attachment to Certificate of Incorporation of Otborx, Inc.

The total number of shares of all classes of stock which the Corporation shall have authority to issue is 101,000,000 of which 100,000,000 shares of par value \$0.001 per share shall be designated as Common Stock and 1,000,000 shares of par value \$0.001 shall be designated as Preferred Stock. Shares of Preferred Stock may be issued in one or more series from time to time by the board of directors, and the board of directors is expressly authorized to fix by resolution the voting powers, designations, preferences, limitations, restrictions, relative rights and distinguishing designations of each series of Preferred Stock before the issuance of any shares of Preferred Stock in such series.