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COVER LETTER

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

SUBJECT: OLivia OTTO 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: OLivia OTTO
Name (Printed or typed)
1900 NW 32nd ST
Address
POMPANO BEACH, FL 33064
City, State & Zip
561-451-6565
Daytime Telephone number
liviaylortotto@icloud.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: OLIVIA OTTO INC. EIN = 83-2223681

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1900 NW 32nd ST.
POMPANO BEACH, FL 33064

SAME

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

SELLING PET SNACKS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: OLIVIA OTTO / PRESIDENT Name and Title: _____

Address 1900 NW 32nd ST. Address: _____
POMPANO BEACH, FL 33064

Name and Title: DOROTHY OTTO / Vice President Name and Title: _____

Address 1900 NW 32nd ST. Address: _____
POMPANO BEACH, FL 33064

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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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: OLIVIA OTTO
Address: 1900 NW 32nd ST.
POMPANO BEACH, FL 33064

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: OLIVIA OTTO
Address: 1900 NW 32nd ST.
POMPANO BEACH, FL 33064

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 10/1/2018 (OPTIONAL)

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

✓ Olivia Otto _____ ✓ 10/18/18
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.

✓ Olivia Otto _____ ✓ 10/18/18
Required Signature/Incorporator Date