P2000089187

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	· · ,,,,,_

Office Use Only



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SECRETARY OF STATI

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312 (850) 656-4724

DATE 11/16/2020		**WALK IN**
ENTITY NAME Old T	ech Industries In	nc.
DOCUMENT NUMBER	R	
	PLEASE	FILE THE ATTACHED AND RETURN
	Plaix Copy	
- XXXX	Certified Copy	
	Certificate of S	Statas
		THE FOLLOWING FOR THE ABOVE ENTITY**
		of Arts & Amendments
	• ,•	of Arts & Amendments Complete File (Inclading Annaal Reports)
	Certificate of S Certificate of S	Status Reflecting:
	APOSTIL	'LE' / NOTARIAL CERTIFICATION
COUNTRY OF DESTINA NUMBER OF CERTIFICA		
TOTAL OWED \$	8.75	ACCOUNT # 120140000108 Luth Luman Services, Inc.
Please call Tina at i	the above number	for any issues or concerns. Thank was so much!

COVER LETTER

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

SUBJECT: Old	recti industries Inc.		
	(PROPUSEU CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an or	riginal and one (1) copy of the arti	cles of incorporation and	l a check for:
□ \$70.00 Filing Fee	- · · · · · ·	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate o Status PPY REQUIRED
FROM: _	Joseph Bressingham	(Defend as a B	
		(Printed or typed)	
<u>8</u>	382 Malcolm Candler Lane, Ap		
	A	ddress	
	West Palm Beach, FL 33401		
	City, S	State & Zip	
5	16-510-9468		
	Daytime Te	elephone number	
jo	seph.bressingham@gmail.co	m	
	E-mail address: (to be used		otification)

NOTE: Please provide the original and one copy of the articles.

FILED

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

2021 NOV 17 AH 9 50

The name of the corpora	I ition shall be: Old Tech Industries Ir	1C.	SECRETALLY OF
ARTICLE II PRING 882 Malcolm Candler Larie, / Wast Palm Beach, FL 33401	CIPAL OFFICE Principal street address		TALLAHASSE Mailing address, if different is:
	the corporation is organized is:		
	s formed to engage in any lawfu ganized under the Florida Busin		
	stock is: 200 shares without par valu	e	
	LOFFICERS AND/OR DIRECTORS Joseph Bressingham, Preside	nt Name and Title	»
Address	882 Malcolm Candler Lane	Address:	
	Apt. 204 West Palm Beach, FL 33401	-	
Name and Title:		_ Name and Title	<u> </u>
Address		_ Address:	
Name and Title:		_ Name and Title	·
Address	· · · · · · · · · · · · · · · · · · ·		·
		-	

. ivaine	and little:	Name and Title:		_
Addre	255	Address:		
				_
				_
ARTICLE VI The name and	REGISTERED AGENT Florida street address (P.O. Box NOT acceptable) of	the registered agent is:		
Name:	Joseph Bressingham			
Address:	882 Malcolm Candler Lane, Apt. 204		ري اتا س	25.
	West Palm Beach, FL 33401		ALC OCC	
ARTICLE VII	INCORPORATOR		(7)	1658 KOV 17
The name and	address of the Incorporator is:			2
Name:	Joseph Bressingham		FI A	<u>က</u> က
Address:	882 Malcolm Candler Lane, Apt. 204		ين ر	\Box
	West Palm Beach, FL 33401			
Effective date, i	EFFECTIVE DATE: if other than the date of filing: date is listed, the date must be specific and cannot	(OPTIONAL) be more than five days prio	r or 90 days after the	
Note: If the dat the document's	te inserted in this block does not meet the applicable s effective date on the Department of State's records.	tatutory filing requirements, th	ris date will not be listed	as
- Argh	med as registered agent to accept service of process for familiar with and accept the appointment as registered Required Signature/Registered Agent	d agent and agree to act in this	Capacity)
l submit this do document to the	cument and affirm that the facts stated herein are to Department of State constitutes a third degree felony i	ue. I am aware that the false as provided for in \$817 ISS F	information submitted in	1 4
Jugh	- Bift		11/16/2020	>
Required Signat	ure/incorporator	Date	. (