

P21000083487

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

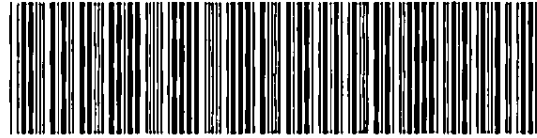
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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2021 SEP 23 PM 4:21
SECRETARY OF STATE
TALLAHASSEE, FL

RECEIVED

2021 SEP 23 PM 3:15

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312

(850) 656-4724

DATE 9-23-21

****WALK IN****

ENTITY NAME Agila Energy Inc.

DOCUMENT NUMBER _____

****PLEASE FILE THE ATTACHED AND RETURN****

~~XXX~~

Plain Copy
Certified Copy
Certificate of Status

****PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY****

Certified Copy of Arts & Amendments
Certified Copy of Arts & Amendments Complete File (Including Annual Reports)
Certificate of Status
Certificate of Status Reflecting: _____

****APOSTILLE / NOTARIAL CERTIFICATION****

COUNTRY OF DESTINATION _____

NUMBER OF CERTIFICATES REQUESTED _____

TOTAL OWED \$ 78.75

ACCOUNT # I20140000108
United Corporate
Services, Inc.

Keith Leppard

Please call Tina at the above number for any issues or concerns. Thank you so much!

COVER LETTER

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

SUBJECT: Agila Energy 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: DOLORES BURTON
Name (Printed or typed)

UCS-100 STATE STREET, SUITE 800
Address

ALBANY NY 12207
City, State & Zip

877-894-9049
Daytime Telephone number

Ogewu.c.agbese@gmail.com
E-mail address: (to be used for future annual report notification)

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

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

SECRETARY OF STATE
TALLAHASSEE, FL

ARTICLE I NAME

The name of the corporation shall be: Agila Energy Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

110 Meadow Ridge Drive, #9

Hermon, ME 04401

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Ogewu Agbese, President, CEO, Director

Name and Title: Daniel D. Lance, Chief Technology Off

Address: 110 Meadow Ridge Drive, #9

Address: 14 Silo Drive

Hermon, ME 04401

Waterford, NY 12188

Name and Title: Gregory Flowers, Chief Financial Officer

Name and Title: Ronald J. Feick, Director of Legal Ops

Address: 1825 Anasazi Court
Colorado Springs, CO 80919

Address: 45709 Tournament Drive
Northville, MI 48168

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: United Corporate Services, Inc.
Address: 3458 Lakeshore Drive
Tallahassee, FL 32312

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Mary Mahoney
Address: 125 Main Street
Buffalo, NY 14203

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 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

By: United Corporate Services, Inc.
Michael A. Barr
Required Signature/Registered Agent

9/23/21
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.

Mary Mahoney
Required Signature/Incorporator

9/21/21
Date

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SECRETARY OF STATE
TALLAHASSEE, FL

ED