

P220000056391

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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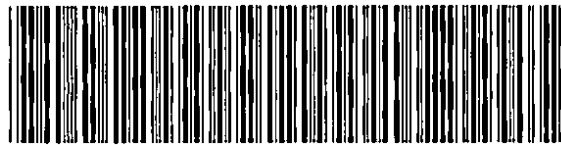
(Business Entity Name)

(Document Number)

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JUL 15 2022

22 JUL 15 AM 4:57

RECEIVED
SECRETARY
OFFICE

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

2022 JUL 15 PM 3:47

RECEIVED

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 807210 4375419

AUTHORIZATION : 

COST LIMIT : \$ 70.00

ORDER DATE : July 15, 2022

ORDER TIME : 1:35 PM

ORDER NO. : 807210-005

CUSTOMER NO: 4375419

DOMESTIC FILING

NAME: BIT HOLDCO, INC.

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION
 CERTIFICATE OF LIMITED PARTNERSHIP
 ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker - EXT.

EXAMINER'S INITIALS: _____

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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: BIT Holdco, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

16178 Cartwright Ln.
Bonita Springs, FL 34110

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To engage in any lawful act or activity for which corporations may be
organized under the Florida Business Corporation Act.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Onur Haytac, Director

Name and Title: Onur Haytac, President

Address 16178 Cartwright Ln.
Bonita Springs, FL 34110

Address: 16178 Cartwright Ln.
Bonita Springs, FL 34110

Name and Title: Onur Haytac, Treasurer

Name and Title: Onur Haytac, Secretary

Address 16178 Cartwright Ln.
Bonita Springs, FL 34110

Address: 16178 Cartwright Ln.
Bonita Springs, FL 34110

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

22 JUL 15 AM 4:57
SECRETARY
ONUR HAYTAC
FLO
e

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: Corporation Service Company
Address: 1201 Hays Street
Tallahassee, FL 32301

22 JUL 15 AM 4:57

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Onur Haytac
Address: 16178 Cartwright Ln.
Bonita Springs, FL 34110

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

Eylima Bahar
Assistant Vice President

Required Signature/Registered Agent

07/15/2022

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.

Onur Haytac

Required Signature/Incorporator

Jul 14 2022 11:13 EDT

Date