

P22000071083

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

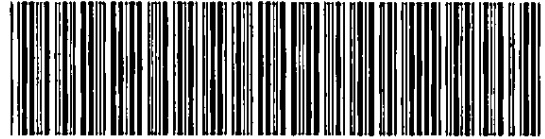
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FALLASSEE, FL (PIT)

COVER LETTER

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

SUBJECT: Certificate of Domestication

Enclosed is an original and one (1) copy of the Articles of Domestication and a check:

FEES:

Certificate of Domestication	\$ 50.00
Articles of Incorporation and Certified Copy	\$ 78.75
Total filing fee	\$128.75

OPTIONAL:

Certificate of Status	\$ 8.75
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From: JUSTIN OLTZ- GREEN

Name (printed or typed)

130 RINCON DRIVE

Address

ST AUGUSTINE, FL 32085

City, State & Zip

310-487-3903

Daytime Telephone Number

justin@thanobody.co

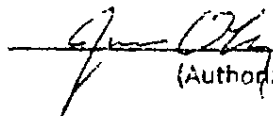
E-mail address: (to be used for future annual report notification)

Articles of Domestication  
Foreign Corporation Domesticating to Florida

The undersigned, JUSTIN OLTZ-GREEN CEO  
(Name) (Title)  
of THE NOBODY CO, INC. a foreign  
corporation, in accordance with s. 607.11922, Florida Statutes, submit these Articles of  
Domestication.

1. Then name of the domesticating corporation is THE NOBGDY CO, INC.  
(Foreign Corporation)
2. The jurisdiction and date of its formation is CALIFORNIA - 12/17/2020
3. The name of the domesticated corporation is THE NOBODY CO, INC.
4. The jurisdiction of formation of the domesticated corporation is Florida
5. The domestication corporation is a foreign corporation and the domestication was  
approved in accordance with its organic law.
6. Attached are Florida Articles of Incorporation to complete the domestication  
requirements pursuant to s.607.0202, F.S.

I certify I am authorized to sign these Articles of Domestication on behalf of the corporation.

  
(Authorized Signature)

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CLERK OF THE STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION**  
IN COMPLIANCE WITH CHAPTER 607, F.S.

**ARTICLE I NAME**

THE NAME OF THE CORPORATION SHALL BE:

THE NOBODY CO, INC.

**ARTICLE II PRINCIPAL OFFICE**

THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDRESS IS:

Principal Address  
130 RINCON DRIVE

ST AUGUSTINE, FL 32095

Mailing Address  
SAME AS PRINCIPLE OFFICE

**ARTICLE III PURPOSE**

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

to engage in any lawful act or activity for which a corporation may be organized under the corporation law of Florida other than banking business, the trust company business or the

**ARTICLE IV SHARES**

THE NUMBER OF SHARES OF STOCK IS: 100000

**ARTICLE VI REGISTERED AGENT AND STREET ADDRESS**

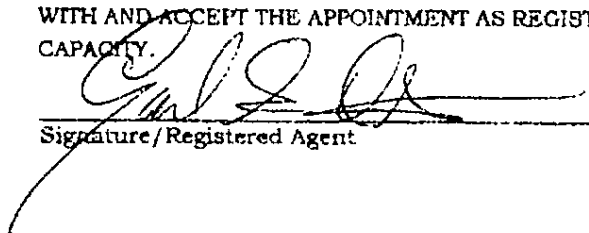
THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS:

EARL OLTZ

130 RINCON DRIVE

ST AUGUSTINE, FL 32095

HAVING BEEN NAMED AS REGISTERED AGENT AND 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.

  
Signature/Registered Agent

Date

5/31/2022

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**ARTICLE V DIRECTORS AND/OR OFFICERS**

**THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:**

Name & Title: JUSTIN OLTZ-GREEN, CE

Address: 130 RINCON DR  
ST AUGUSTINE, FL 32095

Name & Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name & Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name & Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name & Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name & Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name & Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name & Title: \_\_\_\_\_

Address: \_\_\_\_\_

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DEPT. OF STATE  
TALLAHASSEE, FL 32310

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I submit this document and affirm that the facts stated herein are true. I am aware that 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.

  
Signature/Authorized Person

5/31/22  
Date