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(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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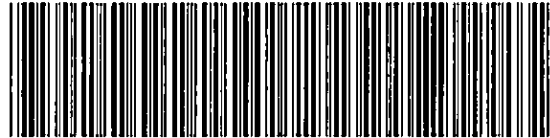
(Business Entity Name)

(Document Number)

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

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SECRETARY OF STATE  
TALLAHASSEE, FL

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TALLAHASSEE, FLORIDA

## COVER LETTER

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

**SUBJECT:** Rizz Pharmaceuticals 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:** Caleb E. Knotts  
Name (Printed or typed)

336 N Bromeliad  
Address

West Palm Beach, FL 33401  
City, State & Zip

662-255-1234  
Daytime Telephone number

calebeknotts@gmail.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: Rizz Pharmaceuticals Inc.

## ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

336 N Bromeliad

West Palm Beach, FL 33401

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any and all lawful business

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## ARTICLE IV SHARES

The number of shares of stock is: 7000

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Caleb E. Knotts, Director

Name and Title: Luis Perezalonso, Director

Address 336 N Bromeliad  
West Palm Beach, FL 33401

Address: 17708 127th Dr N  
Jupiter, FL 33478

Name and Title: Gary Luckner, Director  
Address 3300 NE. 188th St. APT#814  
Aventura, FL 33180

Name and Title: Cory Luckner, Director  
Address: 9997 Falcon Creek Dr  
Highlands Ranch, CO 80130

Name and Title: Andrew Flynn, Director  
Address 460 S Carlton Street  
Castle Rock, CO 80104

Name and Title: Gerardo Perez, Director  
Address: 9665 Taylor River Cir  
Littleton, CO 80125

Name and Title: George H Reeves IV, Director

Name and Title: \_\_\_\_\_

Address: 812 Foxpointe Circle

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

Delray Beach, FL 33445

**ARTICLE VI REGISTERED AGENT**

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: Caleb E. Knotts

Address: 336 N Bromeliad

West Palm Beach, FL 33401

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**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: Caleb E. Knotts

Address: 336 N Bromeliad

West Palm Beach, FL 33401

**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*

Caleb E. Knotts

Required Signature/Registered Agent

4/03/23  
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.*

Caleb E. Knotts

Required Signature/Incorporator

4/03/23  
Date