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INSTRUCTIONS:

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

PICK UP: **BROOK 10/27** $\mathbf{X}\mathbf{X}$ **CERTIFIED COPY PHOTOCOPY** GS XX**FILING** INC ORBITECT INC. 1. (CORPORATE NAME AND DOCUMENT #) 2. (CORPORATE NAME AND DOCUMENT #) 3. (CORPORATE NAME AND DOCUMENT #) (CORPORATE NAME AND DOCUMENT #) 5. (CORPORATE NAME AND DOCUMENT #) 6. (CORPORATE NAME AND DOCUMENT #) **SPECIAL**

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

RTICLE I NAME	tion shall be: Orbitect Inc		
RTICLE II PRINC	Principal street address	Mailing	address, if different is:
240 6th St.	2117		
aytona Beach, 1 E 3			
			
RTICLE III PURPO	<u>DSE</u>		
	he corporation is organized is:	<u>.</u>	
onsulting			
	· · · · · · · · · · · · · · · · · · ·		
		 	
RTICLE IV SHARE the number of shares of	ES 1,000,000		
ic mander of shares of	stock 15		
RTICLE V INITLA	L OFFICERS AND/OR DIRECTORS		
	<u> </u>		
Name and Title	Somil Bhandari, DPST	Name and Title:	
Address	1240 6th St.	Address:	
	Daytona Beach, FL 32117		
	-		
Name and Title:		Name and Title:	
Address		Address:	
Name and Title:		Name and Title	
		Name and Title	25
Address		Address:	2829
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	and Title: N	ame and Title:
Addre	ss	address:
ARTICLE VI The name and	<u>REGISTERED AGENT</u> Florida street address (P.O. Box NOT acceptable) of the	revistered agent is:
Name:	Registered Agents Inc	
Address:	7901 4th St N, Ste 300	
	St. Petersburg, FL 33702	
ARTICLE VII	<u>INCORPORATOR</u>	
The name and	address of the Incorporator is:	
Name:	Amanda J. Beren	
Address: 31410	31416 Agoura Rd., Ste. 118	•
	Westlake Village, CA 91361	
ARTICLE VIO	EFFECTIVE DATE:	
Effective date, i	t other than the date of filing:	(OPTIONAL)
(If an effective filing.)	date is listed, the date must be specific and cannot be	e more than five days prior or 90 days after
	e inserted in this block does not meet the applicable state	tutory filing requirements, this date will not
	a married in this cross does not meet me appricable six	, .
Note: If the dat	effective date on the Department of State's records.	
Note: If the dat the document's Having been na	effective date on the Department of State's records. med as registered agent to accept service of process for the	ne above stated corporation at the place design
Note: If the date the document's Having been na	cifective date on the Department of State's records. med as registered agent to accept service of process for th familiar with and accept the appointment as registered a	ne above stated corporation at the place design ngent and agree to act in this capacity
Note: If the dat the document's Having been na	effective date on the Department of State's records. med as registered agent to accept service of process for th familiar with and accept the appointment as registered a	ne above stated corporation at the place design sgent and agree to act in this capacity 10/26/2023
Note: If the dat the document's Having been na certificate, I am	effective date on the Department of State's records. med as registered agent to accept service of process for the familiar with and accept the appointment as registered a Required Signature/Registered Agent	ngent and agree to act in this capacity 10/26/2023 Date
Note: If the dat the document's Having been na certificate, I am	effective date on the Department of State's records. med as registered agent to accept service of process for th familiar with and accept the appointment as registered a	ngent and agree to act in this capacity 10/26/2023 Date 2. I am aware that the false information su
Note: If the dat the document's Having been na certificate, I am	effective date on the Department of State's records. med as registered agent to accept service of process for th familiar with and accept the appointment as registered a Required Signature/Registered Agent cument and affirm that the facts stated herein are true	pgent and agree to act in this capacity 10/26/2023 Date 2. I am aware that the false information sui

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