

P24000070432

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : REGISTERED AGENTS INC.
Account Number : 120090000081
Phone : (307)200-2803
Fax Number : (813)436-5206

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION NOBODY Inc.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

RECEIVED

2024 NOV 15 AM 10:43

ALL INFORMATION
DATE

2024 NOV 15 AM 10:18

FILED

Name Resolution

I, Jesse Gietz, last member and authorized person of Nobody LLC, acting on behalf of the company, authorize Jennifer Creek of Northwest Registered Agent Service, Inc. to file the name Nobody, a Florida Limited Liability Company for use in the State of Florida.

I acknowledge that the original Nobody LLC, L23000279959 has been dissolved, and I have no intentions to reopen it.

Dated this 13th day of November, 2024.



Jesse Gietz, Authorized Member

FILED

2024 NOV 15 AM 10:18

CLERK OF DISTRICT COURT
TALLAHASSEE, FL

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: Nobody Inc.

ARTICLE II PRINCIPAL OFFICEPrincipal street address

Mailing address, if different is:

7901 4th St N STE 300St. Petersburg, FL 337027901 4th St N STE 300St. Petersburg, FL 33702**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: generic business purpose

ARTICLE IV SHARES

100

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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TALLAHASSEE, FL

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: Northwest Registered Agent LLC
 Address: 7901 4th St N STE 300
St. Petersburg, FL 33702

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Northwest Registered Agent LLC
 Address: 7901 4th St N STE 300
St. Petersburg, FL 33702

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 2024 NOV 15 AM 10:18
 SEC. OF STATE
 TALLAHASSEE, FL

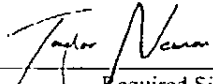
ARTICLE VIII EFFECTIVE DATE:

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.)

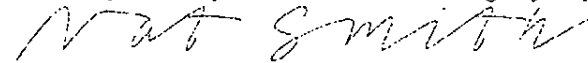
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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:


11-14-24

 Required Signature/Registered Agent 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.


11-14-24

 Required Signature/Incorporator Date