

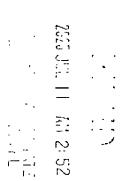
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COVER LETTER

Department of State

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

SUBJECT:

Domestication of OS Ventures, Inc.

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

From: IAN FOSTER

Name (printed or typed)

2816 CHEROKEE AVE

Address

JACKSONVILLE FL 32210

City, State & Zip

904 762 8689

Daytime Telephone Number

IFOSTER@OSVENTURES.COM

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

Articles of Domestication Foreign Corporation Domesticating to Florida

The ur	ndersigned, IAN FOSTER	PRESIDENT	
	(Name)	(Title)	
of OS	S Ventures, Inc	a foreign	
	ration, in accordance with s. 607.11922, Flor stication.	ida Statutes, submit these Articles of	
	Then name of the domesticating corporation	on is OS Ventures, Inc	
	-	(Foreign Corporation)	
2.	The jurisdiction and date of its formation is	GEORGIA 8/5/2002	
3.	. The name of the domesticated corporation is OS Ventures, Inc		
4.	The jurisdiction of formation of the domest	ticated 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 requirements pursuant to s.607.0202, F.S.	on to complete the domestication	
I certif	fy I am authorized to sign these Articles of Do	omestication on behalf of the corporation.	
	(Autho	orized Signature)	

Articles of Domestication Foreign Corporation Domesticating to Florida

The ur	ndersigned.	IAN FOSTER	PRESIDENT	
THE G		(Name)	(Title)	
of O	S Ventur	es, Inc	, a foreign	
corpo	ration, in ac	cordance with s. 607.11922, Flo	rida Statutes, submit these Articles of	
	stication.			
1.	Then nam	Then name of the domesticating corporation is OS Ventures, Inc		
			(Foreign Corporation)	
2.	The jurisd	iction and date of its formation i	s GEORGIA 8/5/2002	
3.		of the domesticated corporation		
4.	The jurisd	iction of formation of the domes	sticated corporation is Florida	
5.	The domestication corporation is a foreign corporation and the domestication was approved in accordance with its organic law.			
6.		are Florida Articles of Incorporatents pursuant to s.607.0202, F.S.	ion to complete the domestication	
l certi	fy I am auth	norized to sign these Articles of D	omestication on behalf of the corporation.	
		(Auth	norized Signature)	

ARTICLES OF INCORPORATION

IN COMPLIANCE WITH CHAPTER 607, F.S.

ARTICLE I NAME		
THE NAME OF THE CORPORATION SHALL	.BE:	
OS Ventures, Inc		
THE PRINCIPAL PLACE OF BUSINESS/MA		
·		
Principal Address 2816 CHEROKEE AVE	Mailing Address 2816 CHEROKEE AVE	
2810 CHENOREE AVE	2010 CHENOREE AVE	
JACKSONVILLE	JACKSONVILLE	
FLORIDA 32210	FLORIDA 32210	
ARTICLE III PURPOSE		
THE PURPOSE FOR WHICH THE CORPOR	RATION IS ORGANIZED:	
ANY AND ALL LAWFUL BUSINESS.		
ARTICLE IV SHARES	1000	
THE NUMBER OF SHARES OF STOCK IS:	1000	
ARTICLE VI REGISTERE	D AGENT AND STREET ADDRESS	
THE NAME AND FLORIDA STREET ADD	RESS (P.O. BOX NOT ACCEPTABLE) OF THE REGISTE	RED AGENT IS:
IAN FOSTER		
2816 CHEROKEE AVE		
JACKSONVILLE FLORIDA 32210		
HAVING BEEN NAMED AS REGISTERE	D AGENT AND TO ACCEPT SERVICE OF PROCESS	S FOR THE
ABOVE STATED CORPORATION AT THE	e place designated in this certificate, I ai	M FAMILIAR
WITH AND ACCEPT THE APPOINTMENT	TAS REGISTERED AGENT AND AGREE TO ACT IN	THIS
CAPACITY.		
1 Sta	JULY 7 2	2025
Signature/Registered Agent	Date	

ARTICLE V DIRECTORS AND/ OR OFFICERS

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

Signature/Author	orized Person		Date
information subm provided for in s.	crl		July 7 2025
Name & Title: Address:		. 11	- 12 · 12 · 12 · 12 · 12 · 12 · 12 · 12
Name & Title: Address:		Name & Title: Address:	7. C3. C3. C3. C3. C3. C3. C3. C3. C3. C3
Name & Title: Address:	FLORIDA 32210 SUSAN FOSTER,DV 2816 CHEROKEE AVE JACKSONVILLE FLORIDA 32210	4.11	
Address:	2816 CHEROKEE AVE JACKSONVILLE	Address:	
Name & Title:	IAN FOSTER, PCST	Name & Title:	