

P20000089187

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

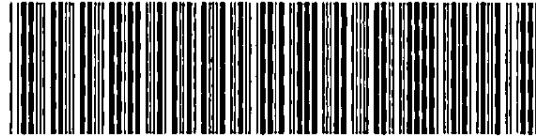
(Business Entity Name)

(Document Number)

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

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Office Use Only



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NOV 17 11 01  
SECRETARY OF STATE  
TALLAHASSEE, FL

2009 NOV 17 AM 9:50  
SECRETARY OF STATE  
TALLAHASSEE, FL

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# Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312

(850) 656-4724

DATE 11/16/2020

**\*\*WALK IN\*\***

ENTITY NAME Old Tech Industries Inc.

DOCUMENT NUMBER \_\_\_\_\_

**\*\*PLEASE FILE THE ATTACHED AND RETURN\*\***

\_\_\_\_\_  
2 2 2 2  
\_\_\_\_\_  
\_\_\_\_\_

*Plain Copy*  
*Certified Copy*  
*Certificate of Status*

**\*\*PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY\*\***

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Certified Copy of Arts & Amendments*  
*Certified Copy of Arts & Amendments Complete File (Including Annual Reports)*  
*Certificate of Status*  
*Certificate of Status Reflecting: \_\_\_\_\_*

**\*\*APOSTILLE / NOTARIAL CERTIFICATION\*\***

COUNTRY OF DESTINATION \_\_\_\_\_

NUMBER OF CERTIFICATES REQUESTED \_\_\_\_\_

TOTAL OWED \$ 78.75 ACCOUNT # I20140000108  
United Corporate Services, Inc. *Keith Leggard*  
*Please call Tina at the above number for any issues or concerns. Thank you so much.*

**COVER LETTER**

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

**SUBJECT:** Old Tech Industries 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

<input checked="" type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

**FROM:** Joseph Bressingham  
Name (Printed or typed)

882 Malcolm Candler Lane, Apt. 204  
Address

West Palm Beach, FL 33401  
City, State & Zip

516-510-9468  
Daytime Telephone number

joseph.bressingham@gmail.com  
E-mail address: (to be used for future annual report notification)

**NOTE:** Please provide the original and one copy of the articles.

FILED

ARTICLES OF INCORPORATION

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

2020 NOV 17 AM 9:50

ARTICLE I NAME

The name of the corporation shall be: Old Tech Industries Inc.

SECRETARY OF STATE  
TALLAHASSEE, FL

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

882 Malcolm Candler Lane, Apt. 204  
West Palm Beach, FL 33401

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: \_\_\_\_\_

This corporation is formed to engage in any lawful act or activity for which corporations  
formed may be organized under the Florida Business Statutes of the State of Florida.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

ARTICLE IV SHARES

The number of shares of stock is: 200 shares without par value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Joseph Bressingham, President Name and Title: \_\_\_\_\_

Address: 882 Malcolm Candler Lane Address: \_\_\_\_\_  
Apt. 204 \_\_\_\_\_  
West Palm Beach, FL 33401 \_\_\_\_\_

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

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

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

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

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: Joseph Bressingham  
 Address: 882 Malcolm Candler Lane, Apt. 204  
West Palm Beach, FL 33401

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Joseph Bressingham  
 Address: 882 Malcolm Candler Lane, Apt. 204  
West Palm Beach, FL 33401

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 TALLAHASSEE, FL

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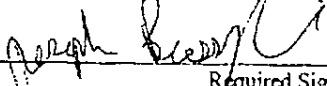
**ARTICLE VIII EFFECTIVE DATE:**

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.)

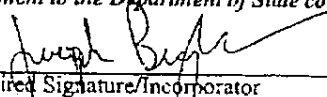
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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*

  
 Required Signature/Registered Agent

11/16/2020  
 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.*

  
 Required Signature/Incorporator

11/16/2020  
 Date