



DATE	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
07/21/2014	201419901544	DOMESTIC ARTICLES/FOR PROFIT (ARF)	125.00	0.00	0.00	0.00	0.00

Receipt

This is not a bill. Please do not remit payment.

JIM BALDRICK AND ASSOCIATES
1395 E. DUBLIN GRANVILLE RD-#305
COLUMBUS, OH 43229

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Jon Husted
2311900

It is hereby certified that the Secretary of State of Ohio has custody of the business records for
SCYLLA FINE JEWELRY INC.

and, that said business records show the filing and recording of:

Document(s)

DOMESTIC ARTICLES/FOR PROFIT

Effective Date: 07/17/2014

Document No(s):

201419901544



United States of America
State of Ohio
Office of the Secretary of State

Witness my hand and the seal of the
Secretary of State at Columbus, Ohio this
21st day of July, A.D. 2014.

Ohio Secretary of State



Form 532A Prescribed by:

JON HUSTED
Ohio Secretary of State

 Central Ohio: (614) 466-3910
 Toll Free: (877) SOS-FILE (767-3453)
www.OhioSecretaryofState.gov
Busserv@OhioSecretaryofState.gov

Mail this form to one of the following:

 Regular Filing (non expedite)
 P.O. Box 670
 Columbus, OH 43216

 Expedite Filing (Two-business day processing
 time requires an additional \$100.00).
 P.O. Box 1390
 Columbus, OH 43216

Initial Articles of Incorporation

(For Profit, Domestic Corporation)

Filing Fee: \$125
(113 - ARF)

First: Name of Corporation
 (Name must include the following word or abbreviation: company, co., corporation, corp., incorporated, or inc.)

Second: Location of Principal office in Ohio

City State

County

RECEIVED
 SECRETARY OF STATE
 2014 JUL 17 PM 2:21
 CLIENT SERVICE UNIT

Effective Date (Optional)
 mm/dd/yyyy (The legal existence of the corporation begins upon the filing of the articles or on a later date specified that is not more than ninety days after filing)

Third: The number of shares which the corporation is authorized to have outstanding.
 (Please state if shares are common or preferred and their par value, if any.)

500	Common	0.00
Number of Shares	Type	Par Value

Fourth: If the corporation is to have an initial stated capital, please state the amount of that stated capital

Amount

****Note:** ORC Chapter 1701 allows additional provisions to be included in the Articles of Incorporation that are filed with this office. If including any of these additional provisions, please do so by including them in an attachment to this form.**

ORIGINAL APPOINTMENT OF STATUTORY AGENT

The undersigned, being at least a majority of the incorporators of Scylla Fine Jewelry Inc.
hereby appoint the following to be statutory agent upon whom any process, notice or demand required or permitted by
statute to be served upon the corporation may be served. The complete address of the agent is

Nick Wolak

Name

3694 Shattuck Ave.

Mailing Address

Columbus

City

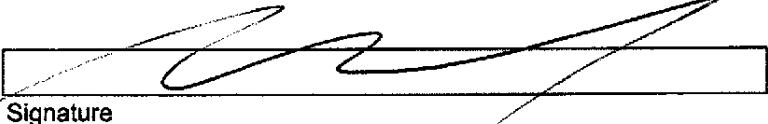
Ohio

State

43220

Zip Code

Must be signed by the
Incorporators or a
majority of the
incorporators


Signature
Signature
Signature**ACCEPTANCE OF APPOINTMENT**

The Undersigned,

Nick Wolak

Statutory Agent Name

, named herein as the

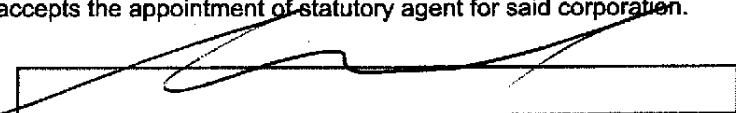
Statutory agent for

Scylla Fine Jewelry Inc

Corporation Name

hereby acknowledges and accepts the appointment of statutory agent for said corporation.

Statutory Agent Signature


Individual Agent's Signature/Signature on Behalf of Business Serving as Agent

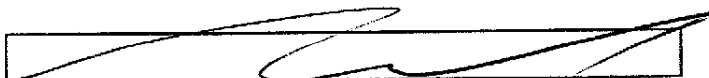
By signing and submitting this form to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the requisite authority to execute this document.

Required

Articles and original appointment of agent must be signed by the incorporator(s).

If the incorporator is an individual, then they must sign in the "signature" box and print his/her name in the "Print Name" box.

If the incorporator is a business entity, not an individual, then please print the entity name in the "signature" box, an authorized representative of the business entity must sign in the "By" box and print his/her name and title/authority in the "Print Name" box.



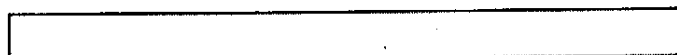
Signature

President

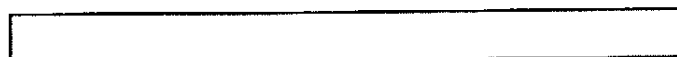
By

Nicholas S. Wolak

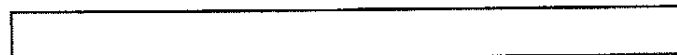
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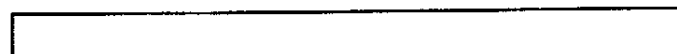
Signature



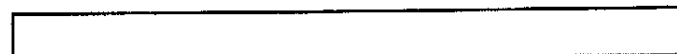
By



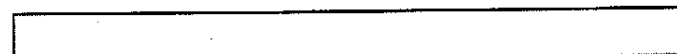
Print Name



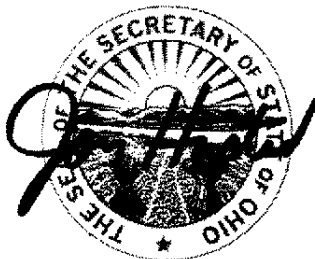
Signature



By



Print Name



Form 590 Prescribed by:

JON HUSTED
 Ohio Secretary of State

 Central Ohio: (614) 466-3910
 Toll Free: (877) SOS-FILE (767-3453)
www.OhioSecretaryofState.gov
Busserv@OhioSecretaryofState.gov

Consent for Use of Similar Name

(To be filed with new business formation document or amendment to
change business name where a name conflict will occur.)

 Name of Entity/Individual Giving Consent

 Charter/Registration/License Number of Entity giving Consent

 Gives it Consent To

 To Use The Name

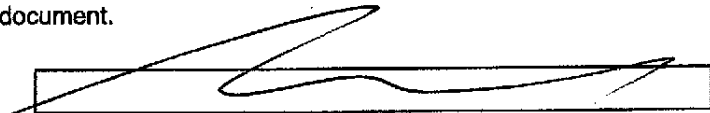
By signing and submitting this form to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the requisite authority to execute this document.

REQUIRED

Consent form must
be signed by an authorized
representative of the
consenting entity.

If authorized representative
is an individual, then they
must sign in the "signature"
box and print their name
in the "Print Name" box.

If authorized representative
is a business entity, not an
individual, then please print
the business name in the
"signature" box, an
authorized representative
of the business entity
must sign in the "By" box
and print their name in the
"Print Name" box.


 Signature

 By (if applicable)

 Print Name

 Signature

 By (if applicable)

 Print Name