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| Certified Copies Certificates of Status | | | | |
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| Special Instructions to Fil | ing Officer: | | | |
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Office Use Only



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SECRETARY OF STATE
ANASSEE, FLORIDA

MR)

COVER LETTER

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

| CLIDATICE Pools Bourg Inc | | |
|--|---------------------------------|--|
| SUBJECT: Posh Paws, Inc. (PROPOSED CORPORA | TE NAME – <u>MUST INC</u> | LUDE SUFFIX) |
| Enclosed are an original and one (1) copy of the arti | | |
| \$70.00 \$78.75 Filing Fee | \$78.75 Filing Fee | \$87.50 Filing Fee, |
| & Certificate of Status | & Certified Copy | Certified Copy & Certificate of Status |
| | ADDITIONAL C | OPY REQUIRED |
| 3894 Mannix Drive Suite 210 | e (Printed or typed) Address | |
| Naples, Florida 34114 City, | State & Zip | |
| 269-317-5443 Daytime T | elephone number | |
| PoshPawsByWendy@gmail.co E-mail address: (to be use | m d for future annual report | notification) |
| | • | • |

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

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

| ARTICLE I The name of the cor | NAME poration shall be: Posh Paws, Inc. | | |
|------------------------------------|--|---------------------------------------|---------------------------------------|
| 38 | PRINCIPAL OFFICE Principal street address 894 Mannix Drive Suite 210 aples, Florida 34114 | | ldress, if different is: |
| ARTICLE III I | PURPOSE nich the corporation is organized is: | | |
| A service corp | | | d |
| | SHARES es of stock is: 1000 | | FILED IN SEP 26 PH SECRETARY OF |
| | INITIAL OFFICERS AND/OR DIRECTO | | STA. T. 5 |
| Name and Tit Address: | de:Wendy Oros, President 3894 Mannix Drive Suite 210 Naples, Fl 34114 | Address: | |
| Name and Tit Address: | ile: | Address: | |
| Name and Tit Address: | ile: | Name and Title: | |
| ARTICLE VI | REGISTERED AGENT | | |
| The name and Flor | rida street address (P.O. Box NOT acceptable) | of the registered agent is: | |
| Address: | Wendy D. Oros 3894 Mannix Drive Suite 210 Naples, Fl 34114 | | |
| ARTICLE VII | INCORPORATOR | | |
| The <u>name and additate</u> Name: | ress of the Incorporator is: | | |
| Address: | Wendy D. Oros 3894 Mannix Drive Suite 210 Naples, Fl 34114 | | |
| | d as registered agent to accept service of proc familiar with and accept the appointment as r | | |
| - AD | Required Signature/Registered Agent | | 9.24.11 |
| | nent and affirm that the facts stated herein a | | |
| document to the De | partment of State constitutes a third degree felo | ony as provided for in s.817.15: | 5, F.S. |
| | Required Signature/Incorporator | · · · · · · · · · · · · · · · · · · · | 7-64. (1 Date |