

9/16/22, 10:47 AM

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Florida Department of State
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FLORIDA PROFIT/NON PROFIT CORPORATION
TERRA CABA KENNELS INC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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SEP 16 2022

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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: TERRA CABA KENNELS INC

ARTICLE II PRINCIPAL OFFICE

Principal street address: 1801 NE 51 ST CT, POMPANO BEACH, FL 33064
Mailing address, if different is: 1801 NE 51 ST CT, POMPANO BEACH, FL 33064

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: SHARES: 100 @ \$1.00

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

RAFAEL CHRISTOPHER CABALLERO, JR. - P/CEO
Name and Title:
Address: 1801 NE 51 ST CT, POMPANO BEACH, FL 33064

EMILY CARNESE - VP/CEO
Name and Title:
Address: 1801 NE 51 ST CT, POMPANO BEACH, FL 33064

Name and Title:
Address:

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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: RAFAEL CHRISTOPHER CABALLERO, JR.
 Address: 1801 NE 51 ST CT
POMPANO BEACH, FL 33064

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: RAFAEL CHRISTOPHER CABALLERO, JR.
 Address: 1801 NE 51 ST CT
POMPANO BEACH, FL 33064

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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

 _____
Rafael Caballero (Sep 14, 2022 22:18:07) 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.

 _____
Rafael Caballero (Sep 14, 2022 22:18:07) Required Signature/Incorporator Date