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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6381

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Account Name : START BIZ HERE INC.
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Email Address: SCOTT@K9dentalservice.com

FOREIGN PROFIT/NONPROFIT CORPORATION
Canine Dental Services Inc.

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

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November 20, 2013

FLORIDA DEPARTMENT OF STATE
Division of Corporations

START BIZ HERE INC.

SUBJECT: CANINE DENTAL SERVICES INC.
REF: W13000064260

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is distinguishable on our records. However, the name is similar to a name already on file with this office. Therefore, the use of this name may result in future complications. The name of the existing entity is : CANINE DENTAL SERVICE OF FLORIDA, INC., document number P13000069517.

You may 1.) resubmit the document under the current name; or 2.) choose to file under another name. If you choose to file under another name, please make the appropriate correction throughout the document(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Pamela Smith
Regulatory Specialist II

FAX Aud. #: E13000255594
Letter Number: 613A00026852

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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. Canine Dental Services Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")

Dog Dentals Inc.
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. COLORADO 3. 26-1077719
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. May 08, 2007 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 510 Signal Ridge Circle, Elizabeth, CO 80107
(Principal office address)

510 Signal Ridge Circle, Elizabeth, CO 80107
(Current mailing address)
8. _____
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Registered Agent Solutions, Inc.
Office Address: 155 Office Plaza Dr., Suite A
Tallahassee, Florida 32301
(City) (Zip code)
10. **Registered agent's acceptance:**
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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12. Names and business addresses of officers and/or directors:

A. DIRECTORSChairman: T. Scott BlanchardAddress: 510 Signal Ridge Circle, Elizabeth, CO 80107

Vice Chairman: _____

Address: _____

Director: T. Scott BlanchardAddress: 510 Signal Ridge Circle, Elizabeth, CO 80107

Director: _____

Address: _____

B. OFFICERSPresident: T. Scott BlanchardAddress: 510 Signal Ridge Circle, Elizabeth, CO 80107Vice President: T. Scott BlanchardAddress: 510 Signal Ridge Circle, Elizabeth, CO 80107Secretary: T. Scott BlanchardAddress: 510 Signal Ridge Circle, Elizabeth, CO 80107Treasurer: T. Scott BlanchardAddress: 510 Signal Ridge Circle, Elizabeth, CO 80107

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. _____

(Signature of Director or Officer listed in number 12 of the application)

14. T. Scott Blanchard - President

(Typed or printed name and capacity of person signing application)

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OFFICE OF THE SECRETARY OF STATE
OF THE STATE OF COLORADO**CERTIFICATE**

I, Scott Gessler, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

Canine Dental Services

is a **Corporation** formed or registered on 05/08/2007 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20071222010.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 11/13/2013 that have been posted, and by documents delivered to this office electronically through 11/15/2013 @ 02:00:45.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Denver, Colorado on 11/15/2013 @ 02:00:45 pursuant to and in accordance with applicable law. This certificate is assigned Confirmation Number 8691132.



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TALLAHASSEE, FLORIDA

Secretary of State of the State of Colorado

*****End of Certificate*****

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Certificate Confirmation Page of the Secretary of State's Web site, <http://www.sos.state.co.us/biz/CertificateSearchCriteria.do>, entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, <http://www.sos.state.co.us>, click Business Center and select "Frequently Asked Questions."

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