

NO 00000005374

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

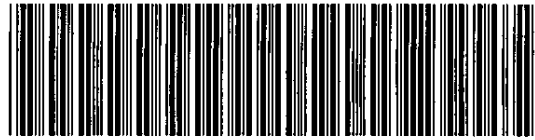
(Business Entity Name)

(Document Number)

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

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06 MAY 15 AM 10:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J 5/18/06

**COVER LETTER**

**FILED**  
06 MAY 15 AM 10:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

**SUBJECT:** MARIA MOLINA ANIMAL AID, INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one(1) copy of the Articles of Incorporation and a check for :

\$70.00  
Filing Fee

\$78.75  
Filing Fee &  
Certificate of  
Status

\$78.75  
Filing Fee  
& Certified Copy

\$87.50  
Filing Fee,  
Certified Copy  
& Certificate

**ADDITIONAL COPY REQUIRED**

**FROM:** Maria Molina  
Name (Printed or typed)

9731 S.W. 183rd Street  
Address

Miami, Fl. 33157  
City, State & Zip

(786) 718-3919  
Daytime Telephone number

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

**ARTICLES OF INCORPORATION**  
In Compliance with Chapter 617, F.S., (Not for Profit)

**ARTICLE I NAME**

The name of the corporation shall be:

MARIA MOLINA ANIMAL AID, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business and mailing address of this corporation shall be:

2123 S.W. 59th Terrace  
Hollywood, Fl. 33023

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
Rehabilitation of Stray Animals.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:  
Voluntier Directors are appointed by the President and/or other  
Directors/Officers.

**ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS**

List name(s), address(es) and specific title(s):

Maria Molina, President. 9731 S.W. 183rd Street, Miami, Fl. 33157  
Juan Molina , Vice-Pres. 9731 S.W. 183rd Street, Miami, Fl. 33157  
Rocky Molina, Secretary 9731 S.W. 183rd Street, Miami, Fl. 33157

**ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:


Maria Molina 9731 S.W. 183rd Street, Miami, Fl. 33157

**ARTICLE VII INCORPORATOR**


The name and address of the Incorporator is:

Maria Molina 9731 S.W. 183rd Street, Miami, Fl. 33157

\*\*\*\*\*  
*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.*

  
\_\_\_\_\_  
Signature/Registered Agent

5-10-06  
Date

  
\_\_\_\_\_  
Signature/Incorporator

5-10-06  
Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA