

N11000007925

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

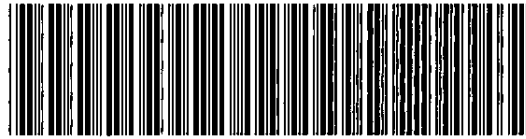
(Business Entity Name)

(Document Number)

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07/28/11--01013--015 \*\*87.50

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39879

FILED

2011 AUG 19 PM 4:36

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. Burch AUG 22 2011

## COVER LETTER

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

SUBJECT: VENICE DOBERMAN RESCUE, 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: THEODORE A BUCCILLI SR  
Name (Printed or typed)

611 MOBILE RD  
Address

VENICE, FL 34293  
City, State & Zip

941-493-2189  
Daytime Telephone number

TMAR 5557@AOL.COM  
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

11 AUG -8 AM 10: 14

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

July 29, 2011

THEODORE A BUCCILLI SR  
611 MOBILE RD  
VENICE, FL 34293

SUBJECT: VENICE DOBERMAN RESCUE INC  
Ref. Number: W11000039879

We have received your document for VENICE DOBERMAN RESCUE INC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

The articles of incorporation of a nonprofit corporation must be prepared in compliance with section 617.0202, Florida Statutes. Please refer to that section of the law for assistance.

Please return the corrected original and one copy of 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) 245-6928.

OK 850-245-6052  
Tim Burch  
Regulatory Specialist II  
New Filing Section

Letter Number: 411A00017933



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED  
11 AUG 19 AM 11:37  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

August 9, 2011

THEODORE A BUCCILLI SR  
611 MOBILE RD  
VENICE, FL 34293

SUBJECT: VENICE DOBERMAN RESCUE INC  
Ref. Number: W11000039879

We have received your document for VENICE DOBERMAN RESCUE INC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

Please return the corrected original and one copy of 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) 245-6928.

Tim Burch  
Regulatory Specialist II  
New Filing Section

Letter Number: 911A00018743

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

**ARTICLE I NAME**

The name of the corporation shall be: **VENICE DOBERMAN RESCUE INC**

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
**VENICE DOBERMAN RESCUE**  
**611 MOBILE RD**  
**VENICE FL 34293**

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

**TO AID IN THE PREVENTION OF CRUELTY TO ANIMALS, SECURE HOMELESS, ABANDONED AND UNWANTED DOMESTIC PETS**

**ARTICLE IV MANNER OF ELECTION** The manner in which the directors are elected and appointed:

THE BOARD OF DIRECTORS SHALL BE APPOINTED BY THE FOUNDER OF VENICE DOBERMAN RESCUE

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

Name and Title: **THEODORE A BUCCILLI DIRECTOR**  
Address: **611 MOBILE RD**  
**VENICE FL 34293**

Name and Title:

Address:

Name and Title: **MARY E BUCCILLI DIRECTOR**  
Address: **611 MOBILE RD**  
**VENICE FL 34293**

Name and Title:

Address:

Name and Title: **THEODORE BUCCILLI JR DIRECTOR**  
Address: **4403 CLOVER RD**  
**RAVENNA OHIO 44266**

Name and Title:

Address:

**ARTICLE VI REGISTERED AGENT**

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

Name: **THEODORE A BUCCILLI**  
Address: **611 MOBILE RD**  
**VENICE FL 34293**

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: **THEODORE A BUCCILLI**  
Address: **611 MOBILE RD**  
**VENICE FL 34293**

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

*Theodore A Buccilli*

Required Signature of Registered Agent

*8-16-2011*

Date

I submit this document and affirm that the facts stated herein are true. I am aware that any 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.

*Theodore A Buccilli*

Required Signature of Incorporator

*8-16-2011*

Date

2011 AUG 19 PM 4:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED