

N 11000009910

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

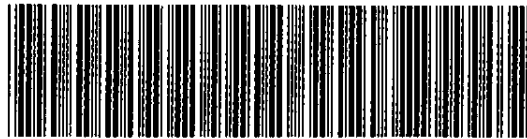
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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 OCT 20 PM 1:48

*Bm 10/20/11*

## COVER LETTER

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

SUBJECT: Petworking, 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: Martha J. Murray

Name (Printed or typed)

125 Mobbly Bay Drive

Address

Oldsmar, Florida 34677

City, State & Zip

727-902-8574

Telephone number

mmurray78@msn.com

E-mail address: (to be used for future annual report notification)

**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: Petworking, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

125 Mobbly Bay Drive

Oldsmar, Florida 34677

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

The creation and operation of an animal shelter and adoption center.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected and appointed:

Directors are elected by a quorum of the Board of Directors

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

Name and Title: Martha J. Murray, President

Address: 125 Mobbly Bay Drive

Oldsmar, Florida 34677

Name and Title: Vickie M. Anders, Secretary

Address: 2643 Burlington Avenue, North

St. Petersburg, Florida 33713

Name and Title: Joseph M. Dunhill, Director

Address: 7305 Alderwood Road

Sarasota, Florida 34243

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

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: Martha J. Murray

Address: 125 Mobbly Bay Drive

Oldsmar, Florida 34677

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Martha J. Murray

Address: 125 Mobbly Bay Drive

Oldsmar, Florida 34677

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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

Martha J. Murray  
Required Signature of Registered Agent

October 15, 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.

Martha J. Murray  
Required Signature of Incorporator

October 15, 2011

Date