N14000004402

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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14 MAY -6 AM 10: 30
SECRETARY OF STATE
DIVISION OF CORPORATIONS

5814

COVER LETTER

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

SUBJECT: Pet Pal of Tampa Bay, 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: Scott Daly
Name (Printed or typed)

8866 108th Lane North
Address

Seminole, FL 33772
City, State & Zip

727-385-8025
Daytime Telephone number

scottymooch@yahoo.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)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 MAY -6 AM 10:30

ARTICLE I NAME

The name of the corporation shall be: Pet Pal of Tampa Bay, Inc

ARTICLE II PRINCIPAL OFFICE

Principal **street** address:

8866 108th Lane North

Seminole, FL 33772

Mailing address, if different is:

Same

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any and all lawful business pertaining to the rescue, rehabilitation, adoption, education, and fundraising to benefit homeless animals.

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

Nomination and voting by board members.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Scott Daly, President

Address: 8866 108th Lane North
Seminole, FL 33772

Name and Title:

Address:

Name and Title: Mary Alexander, Vice President

Address: 4310 Miller Dr.
St Pete Beach, FL 33706

Name and Title:

Address:

Name and Title: Tara Pisano, Secretary

Address: P.O. Box 3062
Winter Haven, FL 33885

Name and Title:

Address:

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

_____ _____

_____ _____

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: Scott Daly

Address: 8866 108th Lane North

Seminole, FL. 33772

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Tara Pisano

Address: P.O. Box 3062

Winter Haven, Fl. 33885

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

Required Signature of Registered Agent — Date: 5-1-14

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.

Required Signature of Incorporator — Date: 5-1-14