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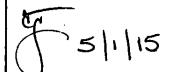
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Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: The Pet Cottage, 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

\$87.50

Filing Fee & Certified Copy

Filing Fee, Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: Wendy A. Derhak

Name (Printed or typed)

103 Greenbriar Drive

Address

Jupiter, FL 33458

City, State & Zip

561-818-5025

Daytime Telephone number

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15 APR 27 PM 1:5

wdfitness@hotmail.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)

	the corporation shall be: The Pet Cottage,	inc. FILED
<u>ARTICLE I</u>	II PRINCIPAL OFFICE	15 APR 27 PM 1: 57
_10	Principal <u>street</u> address: 3 Greenbriar Drive	Mailing address, if different is ARY OF STATE ALL AHASSHE, FLORIDA
Ju	ipiter, FL 33458	······································
	for which the corporation is organized is: To prov	vide quality programs and services lan for their future care and well-being.
		•
		which the directors are elected and appointed:
	W MANNER OF ELECTION The manner in ed by the By-laws.	which the directors are elected and appointed:
	ed by the By-laws.	· · · · · · · · · · · · · · · · · · ·
As provid	ed by the By-laws. V INITIAL OFFICERS AND/OR DIRECTO	PRS
As provid ARTICLE Name and Tit	V INITIAL OFFICERS AND/OR DIRECTO tle: Jean B. Gutkin, President/Secretary Name	end Title:
As provid ARTICLE Name and Tit	v INITIAL OFFICERS AND/OR DIRECTO tle: Jean B. Gutkin, President/Secretary Name	end Title:
As provid ARTICLE Name and Tit	V INITIAL OFFICERS AND/OR DIRECTO tle: Jean B. Gutkin, President/Secretary Name 3610 Gardens Parkway Addre	end Title:
As provid ARTICLE Name and Tit Address	V INITIAL OFFICERS AND/OR DIRECTO tle: Jean B. Gutkin, President/Secretary 3610 Gardens Parkway #1101A Palm Beach Gardens, FL 33410	and Title:
As provid ARTICLE Name and Tit Address	V INITIAL OFFICERS AND/OR DIRECTO tle: Jean B. Gutkin, President/Secretary Name 3610 Gardens Parkway Addre #1101A Palm Beach Gardens, FL 33410 Norma J. Treadwell, Vice President/Treasurer Name 649 Hudson Bay Drive	and Title:
As provid ARTICLE Name and Tit Address	V INITIAL OFFICERS AND/OR DIRECTO tle: Jean B. Gutkin, President/Secretary Name 3610 Gardens Parkway Addre #1101A Palm Beach Gardens, FL 33410 Norma J. Treadwell, Vice President/Treasurer Name	and Title:
As provid ARTICLE Name and Tit Address Name and Tit Address	Intrial Officers AND/OR DIRECTOR Ile: Jean B. Gutkin, President/Secretary Name 3610 Gardens Parkway Addre #1101A Palm Beach Gardens, FL 33410 Name Addre Norma J. Treadwell, Vice President/Treasurer Name 649 Hudson Bay Drive Palm Beach Gardens, FL 33410 Cail J. Coppor Parks	and Title: and Title: ss: and Title:
	Intrial Officers AND/OR DIRECTOR Ile: Jean B. Gutkin, President/Secretary Name 3610 Gardens Parkway Addre #1101A Palm Beach Gardens, FL 33410 Name Addre Norma J. Treadwell, Vice President/Treasurer Name 649 Hudson Bay Drive Palm Beach Gardens, FL 33410 Cail J. Coppor Parks	and Title: and Title: and Title:

Name and Title:_		Name and Title:	
Address		Address:	
		 	
_			
Name and Title:	· · · · · · · · · · · · · · · · · · ·	Name and Title:	
Address		Address:	
			· · · · · · · · · · · · · · · · · · ·
ARTICLE VI	REGISTERED AGENT		
The name and Flo	rida street address (P.O. Box NOT accep	otable) of the registered agent is:	
Name:	Wendy A. Derhak		
Address:	103 Greenbriar Drive		
	Jupiter, FL 33458		
ARTICLE VII	INCORPORATOR		
The <u>name and add</u>	lress of the Incorporator is:		
Name:	Wendy A. Derhak		
Address:	103 Greenbriar Drive	·····	
	Jupiter, FL 33458		
Having been nam certificate, I am fa	ed as registered agent to accept service o miliar with and accept the appointment as	of process for the above stated con s registered agent and agree to act t	poration at the place designated in this in this in this capacity
Wone	Required Signature of Registered.	Agent	40415 Date
I submit this docur to the Department	nent and affirm that the facts stated herei of State constitutes a third degree felony a	in are true. I am aware that any fa	lse information submitted in a document
Wend	Ly a Derhat Required Signature of Incorp		4/24/15
	/ required Signature of Incorp	าดเสเตเ	l Dane

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