

**Electronic Articles of Incorporation  
For**

N16000007878  
FILED  
August 08, 2016  
Sec. Of State  
tscott

NATURE COAST THERAPY DOGS, INC.

The undersigned incorporator, for the purpose of forming a Florida not-for-profit corporation, hereby adopts the following Articles of Incorporation:

**Article I**

The name of the corporation is:

NATURE COAST THERAPY DOGS, INC.

**Article II**

The principal place of business address:

2217 S COLUMBINE AVE  
HOMOSASSA, FL. UN 34448

The mailing address of the corporation is:

P.O. BOX 223  
HOMOSASSA SPRINGS,, FL. 34447

**Article III**

The specific purpose for which this corporation is organized is:

TO PROVIDE TRAINING, INSURANCE AND REGISTRATION FOR MEMBERS WHO ARE INVOLVED IN ANIMAL ASSISTED ACTIVITIES. TO FORM A NETWORK OF CARING PEOPLE WHO WANT TO SHARE THEIR DOGS TO BRING HAPPINESS AND CALM TO THOSE WHO NEED IT MOST.

**Article IV**

The manner in which directors are elected or appointed is:

AS PROVIDED FOR IN THE BYLAWS.

**Article V**

The name and Florida street address of the registered agent is:

JOANNE PETERS MRS  
2217 S COLUMBINE AVE  
HOMOSASSA, FL. 34448

I certify that I am familiar with and accept the responsibilities of registered agent.

Registered Agent Signature: JOANNE PETERS

## Article VI

The name and address of the incorporator is:

JOANNE PETERS  
2217 S COLUMBINE AVE

HOMOSASSA FL 34448

Electronic Signature of Incorporator: JOANNE PETERS

I am the incorporator submitting these Articles of Incorporation and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of this corporation and every year thereafter to maintain "active" status.

## Article VII

The initial officer(s) and/or director(s) of the corporation is/are:

Title: P  
JOANNE PETERS  
2217 S COLUMBINE AVE  
HOMOSASSA, FL. 34448 UN

Title: VP  
DANUA J GWILT  
12121 SKIMMER AVE  
WEEKI WACHEE, FL. 34614 UN

Title: SEC  
TINA M STOCKTON  
3350 W MARIE DRIVE  
CITRUS SPRINGS, FL. 34433 UN

Title: DIR  
RENEE O'CONNOR  
5349 PAPRIKA LOOP  
HOMOSASSA, FL. 34448 UN

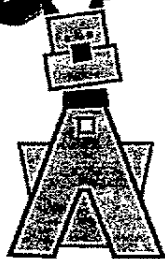
Title: DIR  
PETER MAC DONALD  
8046 W. COCONUT PALM DR  
HOMOSASSA, FL. 34448 UN

## Article VIII

The effective date for this corporation shall be:

08/01/2016

n16awp07878

**NATURE COAST THERAPY DOGS****P.O. BOX 223, HOMOSASSA SPRINGS, FL 34447****9 August 2016**

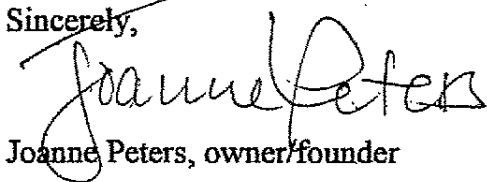
To Whom it May Concern:

This letter is to confirm that I am Joanne Peters, owner of NATURE COAST THERAPY DOGS, LLC and that I have dissolved this organization as of 5 August 2016 (please see attached form from Dept of State, Florida).

I will NOT be reinstating this organization as I would like to register NATURE COAST THERAPY DOGS a non-profit, here in Florida. The "new" name of this organization will be NATURE COAST THERAPY DOGS, INC. Therefore, I am requesting that the State of Florida release the existing name of NATURE COAST THERAPY DOGS, LLC.

Thank you for your help in this matter. If you have questions, I would ask that you call my cell phone at 843-693-4654.

Sincerely,

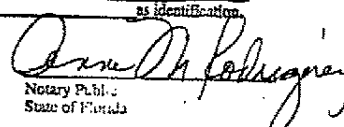


Joanne Peters, owner/founder

Nature Coast Therapy Dogs

Email: [nctherapydogs@gmail.com](mailto:nctherapydogs@gmail.com)State of Florida  
County of Citrus

Subscribed and sworn before me this 9th day of August, 2016  
by Joanne Peters, who is personally known to me or  
who has produced a \_\_\_\_\_ as identification.

  
Notary Public  
State of Florida

100288842511

Document Number: W16000054868

Entity Name: NATURE COAST THERAPY DOGS, INC.

Tracking Number: 100288842511

Pin Number: 2511

We received your online transmitted document. However, the document has not been filed for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation, unless the dissolved/revoked entity provides the Department of State with a notarized affidavit stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

*see attached letter*

One or more major words may be added to make the name distinguishable.

The document number of the name conflict is L110000112060-NATURE COAST THERAPY DOGS LLC.

The name designated in your document is unavailable because it is the same as or not distinguishable from an existing entity. If the principals are the same in both entities, please send a letter or affidavit advising us of this association, along with your document so that we may complete the filing process.

To make the necessary corrections to your filing, return to our website at [www.sunbiz.org](http://www.sunbiz.org) and click on "E-Filing Services", and then choose the type of filing you are trying to correct. Pull down the vertical scroll bar until you see the two blocks entitled "Tracking Number" and "Pin Number," which are located on the right hand side of the page. Next, enter your tracking number and pin number. Both of these numbers are listed in the top portion of this email. Next, simply click on "update filing" to access the document you previously submitted to our office. Please disregard this letter if you have contacted our office and were advised how to correct your document online.

If you have any questions concerning your filing please call 850-245-6052.

Tyrone Scott  
Regulatory Specialist II  
New Filings Section

Letter Number: 160809084218-100288842511

# *State of Florida*

## *Department of State*

I certify from the records of this office that NATURE COAST THERAPY DOGS, LLC was a limited liability company organized under the laws of the State of Florida, filed on September 29, 2011, effective September 23, 2011.

The document number of this limited liability company is L11000112060.

I further certify that said limited liability company was voluntarily dissolved on August 5, 2016.

*Given under my hand and the Great Seal of  
Florida, at Tallahassee, the Capital, this the Sixth  
day of August, 2016*

*Ken Detjen*

*Secretary of State*



Authentication ID: 900288791139-080616-L11000112060

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<https://efile.sunbiz.org/certauthver.html>