# N1600009384

(Re	questor's Name)	
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PICK-UP		MAIL
(Bu	siness Entity Name	e)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		•.
	Office Use Only	,



09/22/16--01006--019 \*\*78.75



EFFECTIVE DATE 09/21/16

~ 09/23/16

# **COVER LETTER**

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

SUBJECT: Hearts for Hometown Dogs, 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 ŝ.

### ADDITIONAL COPY REQUIRED

Ashley Valentine FROM:

Name (Printed or typed)

3317 Courtney Grade

Address

Perry, Florida 32348

City, State & Zip

850-843-3006

Daytime Telephone number

ashley.valentine@taylor.k12.fl.us

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

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

ARTICLE I NAME   The name of the corporation shall be: Hearts for Hometown Dogs, Inc.				
<u>ARTICI</u>	EII PRINCIPAL OFFICE   Principal street address: Mailing address, if different is:   3317 Courtney Grade Mailing address, if different is:			
	Реггу, Florida 32347			
	bose for which the corporation is organized is:			
	ate companion animals in an effort to save those that are facing euthanisia, and to reduce animal cruelty, overpo ance the highest standards in animal welfare.	opulat	ion,	
	ate companion animals in an effort to save those that are facing euthanisia, and to reduce animal cruelty, overpo ance the highest standards in animal welfare.	opulat	ion,	
		nopulat	ion, UVISION	
		-16	SECRETAR	
		16 SEP 2	ion JIVIBION OF CORFORATIONS	

Address	25061 N. W. 176th Ave	Address:	
-	High Springs, Florida 32643		
Name and Title	Ashley Valentine, Treasurer	Name and Titler	
Address	3317 Courtney Grade	Address:	
	Perry, Florida 32348		
Name and Title	Chris Olson, Director	Name and Title:	
Address	4952 SW Raymond Sheffield Road	Address:	
	Greenville, Florida 32331	· <u> </u>	

Name and Title:_	N	lame and Title:
Address	A	Address:
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ame and Title:	N	Jame and Title:
ddress	A	Address:
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_		
	<u>REGISTERED AGENT</u> orida street address (P.O. Box NOT accepta	ble) of the registered agent is:
Name:	Ashley Valentine	
Address:	3317 Courtney Grade	
	Perry, Florida 32348	
ADTICI E VII	INCORPORATOR	
	dress of the Incorporator is:	
Name:	Chris Olson	
Address:	4952 SW Raymond Sheffield I	Road
	Greenville. Fl 32331	

### ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: September 21, 2016 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

September 21, 2016 Date

16 SEP 22 PH 12: 48

Required Signature of Registered Agent

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.

MU. **1**27

September 21, 2016 Date

Required Signature of Incorporator