

W18000013400

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

W18000094458

DEC 28 2013



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03/10/16--01019--017 **78.75

2018 DEC 27 PM 5:03
FALLS CHURCH, VA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 26, 2018

ALICIA J DIMITRION
10435 SW 22TH STREET
MIAMI, FL 33165

SUBJECT: PEOPLE FOR ANIMAL WELLNESS CORP
Ref. Number: W18000094458

20181027 PM12:04

We have received your document for PEOPLE FOR ANIMAL WELLNESS CORP and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information.
<http://dos.myflorida.com/sunbiz/search/guides/corporation-records/title-abbreviations/>

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tyrone Scott
Regulatory Specialist II
New Filings Section

Letter Number: 118A00022058

COVER LETTER

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

SUBJECT: PEOPLE FOR ANIMAL WELLNESS CORP
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Ref # W18000094458
SERIAL # 118A00022058

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: ALICIA J DIMITRIOU
Name (Printed or typed)

10435 SW 22ND STREET
Address

MIAMI, FLORIDA 33165
City, State & Zip

786. 200. 3746
Daytime Telephone number

ADIMITRI37@aol.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:

PEOPLE FOR ANIMAL WELLNESS CORP.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

10435 SW 22ND STREET
MIAMI, FLORIDA 33165

Mailing address, if different is:

Same

2018 DEC 27 PM 5:00

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

to prevent animal cruelty providing
safe and controlled living conditions for homeless
and abandoned cats in the Miami-Dade area,
including the City of Miami.

As we provide compassionate cat care, we will
assist the community to better preserve its fauna
and flora, and promote well being.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed:

In General
Meetings or Hired and Promoted from within.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

ALICIA J DIMITRIOU, CEO

Address:

10435 SW 22ND ST
MIAMI, FLORIDA 33165
PRESIDENT/CEO

Name and Title:

MICHAEL R. HERWANDEZ, O

Address:

4011 AVONlea COURT
Buford, GA 30519
OFFICER (O)

Name and Title:

ARISTIDES DIMITRIOU

Address:

7162 MASTERS ROAD
NEW MARKET MD 21774
OFFICER (O)

Name and Title:

CHRISTINE MARIE DIMITRIOU, O

Address:

7771 NW 7TH ST # 209
MIAMI, FLORIDA 33126
OFFICER (O)

Name and Title:

LUCIA MIONIZ FRAMBURLE, D

Address:

4208 W 16 Ave #208
HAIALEAH, FLORIDA 33012
DIRECTOR (D)

Name and Title:

ADAM J NOTT, D

Address:

570 SOUTH PARK RD. Apt 6-14
Hollywood, Florida 33021
DIRECTOR (D)

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:

ALICIA J DIMITRIOU

Address:

10435 SW 22ND STREET
MIAMI, FLORIDA 33165

ARTICLE VII INCORPORATOR

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

Name:

ALICIA J DIMITRIOU

Address:

10435 SW 22ND STREET
MIAMI, FLORIDA 33165

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 01/01/2019. (OPTIONAL)

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

Required Signature of Registered Agent

12/22/2018
Date

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

12/22/2018
Date