

TRANSITTAL/ETT/IR

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

**SUBJECT:** Animal Help Program, Inc.  
(Proposed corporate name - must include suffix)

000002576550--4  
-06/30/98--01080--008  
\*\*\*\*131.25 \*\*\*\*131.25

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

☐ \$122.50  
Filing Fee  
& Certified Copy

☒ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

**ADDITIONAL COPY REQUIRED**

**FROM:** Margy Barz  
Name (Printed or typed)

PO Box 9345  
Address

Pt. St. Lucie, FL 34985  
City, State & Zip

561/871-9708  
Daytime Telephone number

98 JUN 30 PM 3:08  
FILED  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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

## ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Not for Profit Corporation Act, hereby adopt(s) the following Articles of Incorporation:

FILED  
98 JUN 30 PM 3:08  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

### ARTICLE I NAME

The name of the corporation shall be:

Animal Help Program, Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

PO Box 9345  
Pt. St. Lucie, FL 34985

### ARTICLE III PURPOSE(S)

The specific purpose(s) for which the corporation is organized is(are):

The primary purpose of this organization is to help people obtain low cost inoculations and spay/neuter fees for their animals. Secondly, we foster strays and/or pets that people need homes for, and find new homes for them. We also plan to have a Service Directory for Pet Needs.

### ARTICLE IV MANNER OF ELECTION OF DIRECTORS

The manner in which the directors are elected or appointed is:

Those of us that began this program voted on the President, Secretary-Treasurer and Membership Director.

### ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Margy Barz, Secretary-Treasurer  
734 SW Sail Terrace  
Pt. St. Lucie, FL 34953  
MAILING ADDRESS: PO Box 9345 Pt. St. Lucie, FL 34985

### ARTICLE VI INCORPORATOR

The name and address of the Incorporator to these Articles of Incorporation are:

Margy Barz, Secretary-Treasurer  
PO Box 9345  
Pt. St. Lucie, FL 34985

  
Signature/Incorporator

6-26-98  
Date

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

  
Signature/Registered Agent

6-26-98  
Date