POBO00009893

Alz Dogz Inc. 5220 Brittany Drive South #1209 Saint Petersburg, FL 33715

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

400003108394--8 -01/24/00--01109--002 *****78.75 ******78.75

January 16, 2000

SUBJECT:
Alæ Dogæ Inc
ALZ Dogæ INC

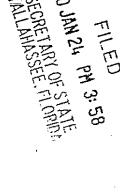
Enclosed is an original and one(1) copy of the articles of incorporation and a check for: \$78.75.

If you have any questions, please feel free to contact me at 727-864-9647.

Sincerely,

Irving Alperin/

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 Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

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The name of the corporation shall be: *Alz Dogz, Inc.*

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 5220 Brittany Drive South #1209
Saint Petersburg, FL 33715

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

500 shares of \$1.00 par value common stock.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Irving Alperin 5220 Brittany Drive South #1209 Saint Petersburg, FL 33715

ARTICLE V INCORPORATOR

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

Irving Alperin 5220 Brittany Drive South #1209 Saint Petersburg, FL 33715

Signature/Incorporator Date

Irving Alperin 5220 Brittany Drive South #1209 Saint Petersburg, FL 33715

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 Date

Sovery alpern