00081937

TRANSMITTAL LETTER

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

*****78.75 *****78.75

BikerPups, Inc. (Proposed corporate name - must include suffix) SUBJECT: _

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:

V. Balletto & Assoc., Inc.

Name (printed or typed)

3956 Town Center Blvd. #165

Address

Orlando, FL 32837

City, State & Zip

(407) 248-9877

Daytime Telephone number

S. Thompson MAR 0 2 2000

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

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

> NAME **ARTICLE I**

The name of the corporation shall be:

BikerPups, Inc.

PRINCIPAL OFFICE ARTICLE II

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

1209 Roma Court Orlando, FL 32825

> **SHARES** ARTICLE III

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

100

INITIAL REGISTERED AGENT AND STREET ADDRESS ARTICLE IV The name and address of the initial registered agent is:

> M. Patricia Luby 9058 Stockton Court Orlando, FL 32817

INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Kathryn M. Willoughby 1209 Roma Court Orlando, FL 32825

Douglas J. Willoughby 1209 Roma Court Orlando, FL 32825

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 19 day of ___ (An additional article must be added if an effective date is requested.) Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1.	The name of the corporation is:	BikerPups, Inc.	· · · · · · · · · · · · · · · · · · ·
2.	2. The name and address of the registered agent and office is:		
	M. Patric	M. Patricia Luby (NAME)	
	9058 Stoc (P.O. E	ekton Court Sox or Mail Drop Box NOT ACCEPTABLE)	FEB 25 PN 3: 33 ECRETARY OF STATE LLAHASSEE FLORIDA
	Orlando,	FL 32817 (CITY/STATE/ZIP)	33 FATE JRIDA

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.

M. Patricia Luby 2-18-2000 (SIGNATURE) J (DATE)