

DATE

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

900003147445---8 -02/25/00--01048--012 *****78.75 *****78.75

Re: Lee Pattison's Dos Training School Inc. (Name of Corobration)

Gentlemen:

Enclosed please find the original and one copy of the Articles of Incorporation, together with m check in the amount of \$78.75

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Feedor Registered Agent Designation for the above named corporation.

Very truly yours.

(Individual's Name)

Lee Pattison's Dog Training School Inc.

3/2 Informed client by letter I corrected ART. VII + VIII to read 4320. Had listed 4330 Hwy.#1.

MAILIN	IG ADDRESS OF C	ORPORATION —
4320	115 Higha	lax #1
GRANT	, Florida	32949
	, DHONE	
(321)6	—— PHONE 74-0996 Number	-
Area Code	Number	Ext.

ARTICLES OF INCORPORATION

of

		OI	,	
LEE PATTISON'S	D06	TRAINING	5chool	The
		(name of corporation)		
				Gtion Act adopt(s

The undersigned acting as the incorporators of a corporation under the Florida Business Corporation Act, adopt(s) the following articles of incorporation for such corporation:

ARTICLE I - CORPORATE NAME	120 ST
The name of the corporation is: LEE PATTISON'S DOG TRAINING School Inc.	BEEFE PHILO
ARTICLE II - DURATION	STATE STATE
This corporation shall exist perpetually unless dissolved according to Florida law.	9 A

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue 1,000 shares of common stock, par value \$ 1,00 per share.

ARTICLE V - INITIAL PRINCIPAL OFFICE

The street address of the initial principal office and, if different, the mailing address is:

STREET ADDRESS		
4320 US HIGHWAY +	¥1	
CITY GRANT	FLORIDA	ZIP 32949
Mailing address, if different		
STREET ADDRESS		
4320 US HIGHWAY	#1	
CITY GRANT	FLORIDA	ZIP 32949
C/ IVIV		an w

ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office and the name of the initial registered agent at the office is:

NAME LEE PATTISON		
ADDRESS 4320 US HIGHWAY	件(m 7 n n 1 0
CITY GRANT	FLORIDA	ZIP 32949

This corporation shall have(her increased or diminished from time to time by the B dresses of the initial director(s) of the corporation are a	y-Laws, but shall never be less than one	(1). The names and
NAME LEE PATTISON		
ADDRESS 4320 US HIGHWA	y #1	
CITY GRANT	STATE FLORIDA	ZIP 32949
NAME		
ADDRESS		
CITY	STATE	ZIP
NAME		
ADDRESS		
CITY	STATE	ZIP
	VIII - INCORPORATORS uese Articles of Incorporation are as follo	ows:
he names and addresses of the incorporators signing the		ows:
he names and addresses of the incorporators signing the	nese Articles of Incorporation are as follo	
NAME LEE PATTISON ADDRESS 4320 U.S. HIGHW	nese Articles of Incorporation are as follo	zip 32949
ne names and addresses of the incorporators signing the NAME LEE PATTISON ADDRESS 4320 U.S. HIGHWA	nese Articles of Incorporation are as follo	ZIP 32949
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he names and addresses of the incorporators signing the NAME LEE PATTISON ADDRESS 4320 LIS HIGHWA CITY GRANT NAME ADDRESS CITY NAME	STATE STATE	ZIP 32949
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(Signature)

(Signature)

CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

LEE PATT 130N'S POG TRAINING School INC. (name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

The above corporation, organized under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at 4320 US HIGHWAY #1 GRANT, FL 32949

has named LEG PAHISON

located at the aforesaid address, as its registered agent to accept service of process within this state.

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.

Ju falluro (Signature) 9-22-00 (Date)