

TRANSMIT L F

Department of State
Division of Corporations
P.O. Box 9527
Tallahassee, FL 32314

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-05/30/00--01097--010
*****87.50 *****87.50

SUBJECT: Critter Services, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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 of
Status

ADDITIONAL COPY REQUIRED

FROM: Brian Money
Name (Printed or typed)

3645 Crazy Horse Trail
Address

St. Augustine, FL 32086
City, State & Zip

(904) 794-0632
Daytime Telephone number

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

FILED
00 MAY 30 PM 4:06
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

Critter Services, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

3645 Crazy Horse Trail
St. Augustine, FL 32086

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The operation of a Whiskers & Paws franchise. Whiskers and Paws is a pet food and supply delivery service.

ARTICLE IV SHARES

The number of shares of stock is:

300

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Brian Money (Secretary)
3645 Crazy Horse Trail
St. Augustine, FL 32086

Suzanna Pavelle (President)
3645 Crazy Horse Trail
St. Augustine, FL 32086

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Brian Money
3645 Crazy Horse Trail
St. Augustine, FL 32086

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Brian Money
3645 Crazy Horse Trail
St. Augustine, FL 32086

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

B. Money
Signature/Registered Agent

5/23/2000
Date

B. Money
Signature/Incorporator

5/23/2000
Date

FILED
00 MAY 30 PM 4: 06
SECRETARY OF STATE
TALLAHASSEE FLORIDA