

OFFICE USE ONLY (Document #)

# LAZARUS CORPORATE FILING SERVICE

(Requestor's Name)

3320 S.W. 87 AVENUE

(Address)

MIAMI, FLORIDA (305)552-5973

(City, State, Zip)

(Phone #)

TERESA ROMAN (TALLAHASSEE REPRESENTATIVE)

600003360436--B  
-08/17/00--01016--010  
\*\*\*\*\*78.45 \*\*\*\*\*78.45

600003360436--B  
-08/17/00--01016--011  
OFFICE USE ONLY \*\*\*\*\*0.30 \*\*\*\*\*0.30

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. PEMBROKE SHORE DOGS HOUSE SANTA  
(Corporation Name) (Document #)

2. BARBARA, INC.  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

☒ Walk in

☒ Pick up time 2:00

☒ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

00 AUG 17 AM 11:59  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

FILED

00 AUG 17 AM 10:23  
RECEIVED  
DIVISION OF CORPORATION

Examined & Initialed

## **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.

### **ARTICLE I - NAME:**

The Name of the corporation shall be:

**PEMBROKE SHORE DOGS HOUSE SANTA BARBARA, INC.**

### **ARTICLE II - PRINCIPAL OFFICE:**

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

600 N.W. 141 ST. # 201  
PEMBROKE PINES, FL. 33028

### **ARTICLE III - SHARES:**

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

100

### **ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS:**

The name and address of the initial registered agent is:

JOSE G. RODRIGUEZ  
600 NW. 141 ST. # 201  
PEMBROKE PINES, FL. 33028

**FILED**  
00 AUG 17 AM 11:59  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**ARTICLE V - INCORPORATOR(S):**

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

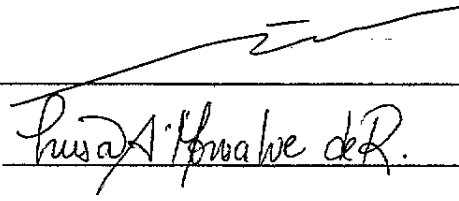
PEMBROKE SHORE DOGS HOUSE SANTA BARBARA, INC  
JOSE G. RODRIGUEZ  
600 NW. 141 ST. # 201  
PEMBROKE PINES, FL. 33028

**ARTICLE VI - DIRECTOR(S):**

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

PRESIDENT	VICE. PRESIDENT
JOSE G. RODRIGUEZ	LUISA A. MONSALVE DE RODRIGUEZ
600 N.W. 141 ST. # 201	600 N.W. 141 ST # 201
PEMBROKE PINES, FL. 33028	PEMBROKE PINES, FL. 33028

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this \_08\_ day  
of \_16\_, 2000

  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**CERTIFICATE OF DESIGNATION**  
**REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of sections 607.0501 or 617.0501, 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:

**PEMBROKE SHORE DOGS HOUSE SANTA BARBARA, INC.**

2. The name and address of the registered agent and office is:

JOSE G. RODRIGUEZ  
600 NW 141 ST. # 201  
PEMBROKE PINES, FL. 33028

**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 REGISTRERED 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 I FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.**

DATE: 08/16/00

FILED  
00 AUG 17 AM 11:59  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA