

TRANSMITTAL LETTER

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

100003944201--6

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-04/02/01--01153--007
*****78.75 *****78.75

SUBJECT: CRAZY TAILS GROOMING SALON, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☒ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: HUMBERTO CALVO
Name (Printed or typed)

11180 SW 107 STREET, APT. 201
Address

MIAMI, FLORIDA 33176
City, State & Zip

(305) 279-7473
Daytime Telephone number

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

FILED
01 APR -2 AM 11:51
SECRETARY OF STATE
TALLAHASSEE FLORIDA
T. SMITH APR 04 2001

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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:

CRAZY TAILS GROOMING SALON, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

11180 SW 107 STREET, APT. 201, MIAMI, FLORIDA 33176

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY ACTIVITY OR BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES OF AMERICA
AND OF THE STATE OF FLORIDA.

ARTICLE IV SHARES

The number of shares of stock is:

ONE THOUSAND (1000) SHARES.

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

HUMBERTO CALVO
11180 SW 107 STREET, APT. 201
MIAMI, FL 33176

ARTICLE VI REGISTERED AGENT

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

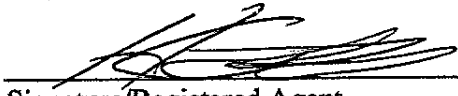
HUMBERTO CALVO
11180 SW 107 STREET, APT. 201
MIAMI, FL 33176

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

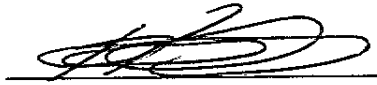
HUMBERTO CALVO
11180 SW 107 STREET, APT. 201
MIAMI, FL 33176

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



Signature/Registered Agent

03-19-01
Date



Signature/Incorporator

03-19-01
Date

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TALLAHASSEE FLORIDA