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To:
Division of Corporations
Fax Number : (850)205-0381

From:
Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305)599-0839
Fax Number : (305)716-0346

FLORIDA PROFIT CORPORATION OR P.A.

ANYREASON PET CARE, INC.

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ARTICLES OF INCORPORATION
OF

ANYREASON PET CARE, INC.

THE UNDERSIGNED INCORPORATOR (S), FOR THE PURPOSE OF FORMING A CORPORATION UNDER THE FLORIDA GENERAL CORPORATION ACT, HEREBY ADOPTS (S) THE FOLLOWING ARTICLES OF INCORPORATION.

ARTICLES I NAME

THE NAME OF THE CORPORATION SHALL BE: ANYREASON PET CARE, INC.
THE PRINCIPAL PLACE OF BUSINESS OF THIS CORPORATION SHALL BE: 721 BRIARWOOD TERRACE DAVIE, FLORIDA 33325

ARTICLES II NATURE OF BUSINESS

THIS CORPORATION MAY ENGAGE IN OR TRANSACT ANY OR ALL LAWFUL ACTIVITIES OR BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES, THE STATE OF FLORIDA, OR ANY OTHER STATE, COUNTRY, TERRITORY OR NATION.

ARTICLE III CAPITAL STOCK

THE AGGREGATE NUMBER OF SHARES OF STOCK AND ITS VALUE THAT THIS CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS: FIVE HUNDRED SHARES, PAR VALUE OF \$1.00.

ARTICLE IV TERM OF EXISTENCE

THIS CORPORATION IS TO EXIST PERPETUALLY.

ARTICLE V OFFICERS DIRECTORS

THE NAME (S) AND STREET ADDRESS (ES) OF THE INITIAL OFFICER (S) AND DIRECTOR (S), IF ANY, WHO SHALL HOLD OFFICE THE FIRST YEAR OF THE CORPORATION'S EXISTENCE OR UNTIL THEIR SUCCESSOR (S) IS (ARE) ELECTED, IS (ARE):
ANEZ M. MOFFI 721 BRIARWOOD TERRACE DAVIE, FLORIDA 33325 PRESIDENT

ARTICLE VI INCORPORATOR (S)

THE NAME (S) AND STREET ADDRESS (ES) OF THE INCORPORATOR (S) TO
THIS ARTICLES OF INCORPORATION IS (ARE):

ANEZ M. MOFFI 721 BRIARWOOD TERRACE DAVIE, FLORIDA 33325

IN WITNESS WHEREOF, THE UNDERSIGNED INCORPORATOR (S) HAS (HAVE)
EXECUTED THESE ARTICLES OF INCORPORATION THIS ~~7th~~ DAY OF ~~MARCH~~ 2002

SIGNATURE (S) OF INCORPORATOR (S)

x. Anez M. Moffi

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CERTIFICATE OF DESIGNATION
REGISTER AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.325, 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: ANYREASON PET CARE, INC.
2. THE NAME AND ADDRESS OF THE REGISTERED AGENT AND OFFICE IS:

NAME: ANEZ M. MOFFI

ADDRESS: 721 BRIARWOOD TERRACE DAVIE, FLORIDA 33325

SIGNATURE
TITLE
DATE

Anez M. Moffi
3-7-02

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HERBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE
DATE

Anez M. Moffi
3-7-02