TRANSMITTAL LETTER

Department of State

P. O. Box 6327 Tallahassee, FL 32				- - -			
SUBJECT:	PETTRANS (PROPOSED CORPORA)	IE NAME – MUST INCL	UDE SUFFIX)	77 - 1228 2			
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:							
\$70.00 Filing Fee	TV\$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED				
FROM:	6996 Wood	Printed or typed) Bridge (00005039935— 03/04/0201031015 *****78.75 ******78.				
	Boca Rator	ddress Flori DA State & Zip	<i>3343</i> 4	-			
		3 9740	DOOZ MAI SECRE ALLAH	_:-			

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

2589-192 WOZ-6766



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

FILED

2002 MAR 18 AM 11: 07

SECRETARY OF STATE TALLAHASSEE FLORIDA

March 11, 2002

MARTIN HASON 6996 WOODBRIDGE CIRCLE BOCA RATON, FL 33434

SUBJECT: PET TRANS CO. Ref. Number: W02000006766 all Money are
address are
luclosed atth
copy

We have received your document for PET TRANS CO. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list the corporation's principal office and/or a mailing address in the document.

Please list the street address of each officer/director.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6973.

Claretha Golden Document Specialist New Filings Section

Letter Number: 902A00014642

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)
ARTICLE I NAME The name of the corporation shall be:
The name of the corporation shall be:
PETTAANSO. CO. (PET TRANS Co)
ARTICLE II PRINCIPAL OFFICE
The principal place of business/mailing address is:
1990 Woodbrige Clede
Boca Raton, FL 33432
ARTICLE III PURPOSE The purpose for which the corporation is organized is:
The purpose for which the corporation is organized is:
Transport of PETS TO VETERANIANS And groomers
ARTICLE IV SHARES
The number of shares of stock is: 300
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)
The name(s), address(es) and title(s): martin 1/0 2-11-1996 Woodbule Usle
(700) HASON - 6 Reta Ide
The name(s), address(es) and title(s): MARTIN HASON - 6996 Woodbrile Cirle Spains
Paul Laffe 950 N Dergie Stylwy (100 Show) Boca Rath Horida 33432
(100 Shows) Box. Rot 701. 1 (221/2)-
ARTICLE VI REGISTERED AGENT
The name and Florida street address of the registered agent is:
MARTIN HASON
6996 Woodbridge Circle SSE TO I
ARTICLE VII INCORPORATOR FLOU da 33434 TO TO
The name and address of the Incorporator is:
MARTIN HASON
a 6996 Whodbudge (ende
Dore Rate The 2210210

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
The state of the s
/ Martin Nason 2/27/2002
Signature/Registered Agent Date
(/ Mart. Aleson
Signature (Trace)
Signature/Incorporator Date

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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:	PETTRANS CO.	
2.	The name and address of the regis Ma 699 (P.O. Bo	TALLAHASSEE FLORIDA AMII: 07 (NAME) (NAME)	

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.

Mathe Fason 3/2 (SIGNATURE) (DATE)