

P04000050849

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

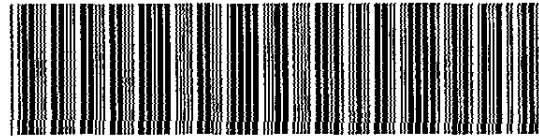
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FBI - STATE

TRANSMITTAL LETTER

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

SUBJECT: _____

Doggy, INC

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: _____

Sabrina R. La Rotta

Name (Printed or typed)

19877 E. Country Club Dr #605

Address

Aventura, FL 33180

City, State & Zip

305-792-2270

Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FL 32314

06 MAR 19 AM 7:48

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

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:

Doggy, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

19877 E. Country Club Dr.
#605
Aventura, FL 33180

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Dog Accesories

ARTICLE IV SHARES

The number of shares of stock is:

100%

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Sabrina R. La Rotta - owner
19877 E. Country Club Dr #605
Aventura, FL 33180

ARTICLE VI REGISTERED AGENT

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

Sabrina R. La Rotta - owner
19877 E. Country Club Dr. #605
Aventura, FL 33180

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Sabrina R. La Rotta - owner
19877 E. Country Club Dr #605
Aventura, FL 33180

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

Date

Signature/Incorporator

Date

FILED

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 MAR 19 AM 7:40

3/16/04

3/16/04