

P04000160361

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

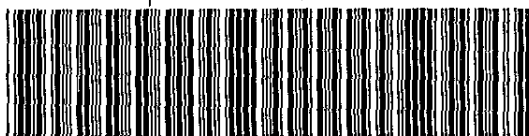
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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11-29

TRANSMITTAL LETTER

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

SUBJECT: Dapper Dog 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: Maureen Daigle-Watson/Lois K Lane

Name (Printed or typed)

19216 NW 156 Ave

Address

Alachua, FL 32615

City, State & Zip

352-281-3565

Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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:

Dapper Dog Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

19216 NW 156 Ave. Alachua, FL 32615

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Mobile Dog Grooming

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):

Maureen Daigle-Watson, 19216 NW 156 Ave. Alachua, FL 32615, , President
Lois K Lane ,18912 NW 46 Ave. Alachua, FL 32615, Vice President

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Maureen Daigle-Watson, 19216 NW 156 Ave., Alachua, FL 32615

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Maureen Daigle-Watson, 19216 NW 156 Ave. Alachua, FL 32615

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

November 15, 2004

Date


Signature/Incorporator

November 15, 2004

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA