

P05000109525

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

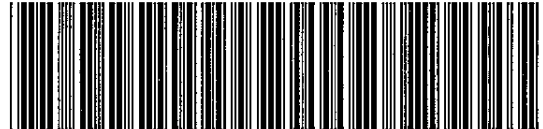
(Business Entity Name)

(Document Number)

Certified Copies 1 Certificates of Status _____

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DIVISION OF CORPORATIONS

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

8-8-05

TRANSMITTAL LETTER

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

SUBJECT: THE PUPPY SPOT, 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: THE PUPPY SPOT, INC
Name (Printed or typed)

2515 E Colonial DR
Address

ORLANDO FL 32803
City, State & Zip

(407) 228-6191
Daytime Telephone number

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:

The puppy Spot, Inc. of Orlando

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

*2515 E. Colonial Dr
Orlando, Florida 32803*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PET STORE

ARTICLE IV SHARES

The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

*Amanda Pollard, PRESIDENT, SEC, TREASURER,
2515 E. Colonial Dr.
Orlando, FL 32803*

ARTICLE VI REGISTERED AGENT

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

*Amanda Pollard
2515 E. Colonial Dr.
Orlando, FL 32803*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*Amanda Pollard
2515 E. Colonial Dr.
Orlando, FL 32803*

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

Amanda Pollard

Signature/Registered Agent

8/8/05

Date

Amanda Pollard

Signature/Incorporator

8/8/05

Date

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