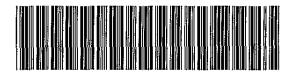
## P05000145202

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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OF DEAL AND THE WAR

W05-46330

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## TRANSMITTAL LETTER

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

ginal and one (1) copy of the ar	ticles of incorporation and	d a check for:
\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
	· •	,
319 10th A	renue Nov4	<u></u>
Jacksonville City	Beach, FL 3	32350
	Filing Fee & Certificate of Status  May Ann Ho Name  319 10th A	Filing Fee & Certificate of Status Filing Fee & Certified Copy  ADDITIONAL CO

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

Daytime Telephone number



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

October 7, 2005

MARY ANN HOWELL 319 10TH AVENUE NORTH JACKSONVILLE BEACH, FL 32250

SUBJECT: SICKY PAWZ PET BAKERY, COMPANY

Ref. Number: W05000046330

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

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

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) 245-6931.

Letter Number: 605A00061135

Becky McKnight Document Specialist New Filings Section

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

## ARTICLE I NAME The name of the corporation shall be: Sticky Pawz Pet Bakery Company The principal place of business/mailing address is: 10th Arenve north JWBZ **PURPOSE** The purpose for which the corporation is organized is: to proted personal assets ARTICLE IV 1 (one) The number of shares of stock is: ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s): ARTICLE VI REGISTERED AGENT. The name and Florida street address of the registered agent is: Mary Ann Howell 728 Palm Tree Rd. Jay Bah, FC 32250 INCORPORATOR The name and address of the Incorporator is: Mary Pro Howald 728 Palm Tree Rd. Jay Boh, FL 32,250 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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

Signature/Registered Agent /Incorporator