# P07000067566

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

7 JUN -7 PM 3:5



# **COVER LETTER**

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

SUBJECT: The Park Pet Suites, Inc.				
(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u> )				
Enclosed are an orig	inal and one (1) copy of the artic	cles of incorporation and	a check for:	
□ ##0.00	[] ##0 ##	[] ##0 ##		
<b>□</b> \$70.00	<b>▼</b> \$78.75	\$78.75	\$87.50	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
	& Certificate of Status	& Certified Copy	Certified Copy	
			& Certificate of	
			Status	
		ADDITIONAL CO	PY REQUIRED	
FROM: William R. McDonald				
Name (Printed or typed)				
1893 N. Lake Reedy Blvd.				
Address				
•				
Frostproof, FL 33843				
City, State & Zip				
•				
	863-635-1169 (or	cell 863-679-	0110)	
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)

FILED

# ARTICLE I NAME

The name of the corporation shall be:

The Park Pet Suites, Inc.

07 JUN -7 PM 3:54

SECRETARY OF STATE TALLAHASSEE, FLORIDA

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1893 N. Lake Reedy Blvd. Frostproof, FL 33843

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To transact any and all lawful business for which corporations may be organized under the laws of the State of Florida, and to have all powers that are afforded to corporations under Florida law.

#### 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):

Jill M Byrne, President and Director William R. McDonald, Secretary and Director Lillian Carole McDonald, Treasurer

Richard C. Stevens, Director

#### ARTICLE VI REGISTERED AGENT

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

William R. McDonald 1893 N. Lake Reedy Blvd. Frostproof, FL 33843

#### ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

William R. McDonald 1893 N. Lake Reedy Blvd. Frostproof, FL 33843

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

William 1. Mr Dendel	6/5/07	
Signature/Registered Agent	Date	
William M. M. Donal	6/5/07	
Signature/Incorporator	Date	