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COVER LETTER

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

SUBJECT: MUFF-HOUSE VOGGIE DAYCARE INC. (PROPOSED CORPORATE NAME, -)MUST INCLUDE SUFFIX)						
	(11010222001110112	<u> </u>	,			
Enclosed are an ori	iginal and one (1) copy of the artic	cles of incorporation and	a check for:			
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED			
FROM: _	DONNA M. CARR	Printed or typed)	7A.C.C	2000		
1102 S.W. Jenniter Terrace						
	Port St. Lucie, City,	Florida 340 State & Zip	963 P	AH 10: 33		

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

772.336.2936

Daytime Telephone number

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:	
RUFF-House Doggie Day Care, Inc.	
ARTICLE II PRINCIPAL OFFICE The principal street address and mailing address, if different is:	
1102 S.W. Jennifer Terrace Port St. Lucie, Florida 34953	
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	de as Wait a dhair avanz
To create a fun and exciting environment for are AWAY at WORK.	ags while their owners
ARTICLE IV SHARES	
The number of shares of stock is: 200 @ \$100 each	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):	
Donna M. Carroll - President CED	2000 HAY 15 SECRETARY ALLAHASSE
Alexander Carroll - Vice President	HAY TO
,	SSEE.
ARTICLE VI REGISTERED AGENT	ne registered agent is:
The name and Florida street address (P.O. Box NOT acceptable) of the	e registered agent is:
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the Donna M. Carroll 1102 S.W. Jennifeld Terrace Port St. Luci. Fl. 34653	- ω - ω - ω - ω - ω - ω - ω - ω - ω - ω
Port St. Lucie, Fl. 34953	
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
Doma M. Carroll	
1102 S.W. Jennifel Terrace	
Port St. Lucie, Fl. 34953	*********
Having been named as registered agent to accept service of process for the above so certificate, I am familiar with and accept the appointment as registered agent and agree	tated corporation at the place designated in this ee to act in this capacity
1 manole	<u>5.13.08</u> Date
Signature/Registered Agent	Date
Munna IVI Carroll	<u>5.13.08</u>
Signature/Incorporator	Date