

P08000052820

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

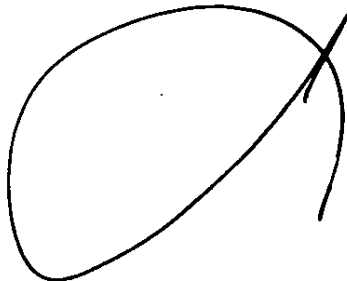
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED  
08 MAY 29 PM 4:14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

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

SUBJECT: The Purple Poodle, 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: Kimberly S. McLane  
Name (Printed or typed)

4951 NE 138th Terrace  
Address

Williston, FL 32696  
City, State & Zip

352-262-3407  
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 15, 2008

KIMBERLY S. MCLANE  
4951 NE 138TH TERRACE  
WILLISTON, FL 32696

SUBJECT: THE PURPLE POODLE, INC.  
Ref. Number: W08000024415

We have received your document for THE PURPLE POODLE, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

The document number of the name conflict is P98000061170 PURPLE POODLE, INC..

Please return 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) 245-6934.

Loria Poole  
Regulatory Specialist II

Letter Number: 808A00031085

**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:

Purple Poodle Pet Spa, Inc

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

4951 N.E. 138<sup>th</sup> Terrace  
Williston, FL 32696

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Pet grooming services and sale of pet care supplies.

**ARTICLE IV SHARES**

The number of shares of stock is:

100 shares

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

Kimberly S. McLane, President  
4951 N.E. 138<sup>th</sup> Terrace  
Williston, FL 32696

**ARTICLE VI REGISTERED AGENT**

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

Kimberly S. McLane  
4951 N.E. 138<sup>th</sup> Terrace  
Williston, FL 32696

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Kimberly S. McLane  
4951 N.E. 138<sup>th</sup> Terrace  
Williston, FL 32696

\*\*\*\*\*

*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.*

Kimberly S. McLane  
Signature/Registered Agent

5/6/08  
Date

Kimberly S. McLane  
Signature/Incorporator

5/6/08  
Date

FILED  
08 MAY 29 PM 4:14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA