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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

60-51-01
2009

COVER LETTER

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

SUBJECT: HAPPY HEARTS HOME AND PET CARE, 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: ANNA ALLISON
Name (Printed or typed)

10072 PACIFIC PINES AVENUE
Address

FT. MYERS, FL 33966
City, State & Zip

239-810-2695
Daytime Telephone number

ANNA.ALLISON92@YAHOO.COM
E-mail address: (to be used for future annual report notification)

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:

HAPPY HEARTS HOME AND PET CARE, INC.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

10072 PACIFIC PINES AVENUE; FORT MYERS, FL 33966

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY LAWFUL BUSINESS

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):

ANNA E. ALLISON, PRESIDENT
RICHARD K. ALLISON, SECRETARY / TREASURER

ARTICLE VI REGISTERED AGENT

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

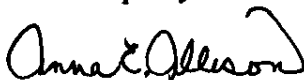
ANNA E. ALLISON
10072 PACIFIC PINES AVENUE; FORT MYERS, FL 33966

ARTICLE VII INCORPORATOR

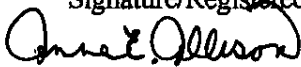
The name and address of the Incorporator is:

ANNA E. ALLISON
10072 PACIFIC PINES AVENUE; FORT MYERS, FL 33966

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



Signature/Registered Agent



Signature/Incorporator

9/30/09

Date

9/30/09

Date

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2009 OCT 13 P 12:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA