

P10000011402

(Requestor's Name)

(Address)

(Address)

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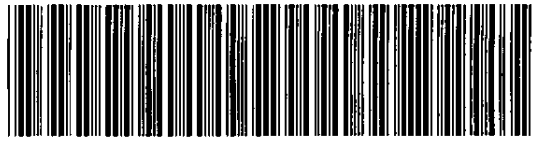
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
10 FEB -4 PM 1:49

W1-4493

**COVER LETTER**

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

SUBJECT:     THERAPY PETZ INCORPORATED      
**(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:     KAREN FISHMAN - FRANK      
Name (Printed or typed)

    3000 SW 50 STREET      
Address

    FORT LAUDERDALE, FL 33312      
City, State & Zip

    (954) 961-1353      
Daytime Telephone number

    therapypetz@aol.com      
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 29, 2010

KAREN FISHMAN-FRANK  
3000 SW 50 STREET  
FORT LAUDERDALE, FL 33312

SUBJECT: THERAPY PETZ  
Ref. Number: W10000004693

We have received your document for THERAPY PETZ and your check(s) totaling \$1370.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

Please return the corrected 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.

Becky McKnight  
Regulatory Specialist II  
New Filing Section

Letter Number: 110A00002419

**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:

THERAPY PETZ INC.

**ARTICLE II PRINCIPAL OFFICE**

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

3000 SW 50 ST, FT LAUD, FL

DESIGN # 33312

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

TO SELL

PLUS H ANIMALS.

**ARTICLE IV SHARES**

The number of shares of stock is:

1,000

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

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

KAREN FISHMAN - FRANK

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
10 FEB - 4 PM 1:49

**ARTICLE VI REGISTERED AGENT**

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

KAREN FISHMAN - FRANK

3000 SW 50 ST, FT LAUD, FL

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

KAREN FISHMAN - FRANK

3000 SW 50 STREET  
FORT LAUDERDALE, FL 33312

33312

\*\*\*\*\*  
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

K E F I F  
Signature/Registered Agent

12/28/09  
Date

K E F I F  
Signature/Incorporator

12/28/09  
Date