

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

((H10000165552 3)))



H100001655523ABCZ

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To: Division of Corporations  
Fax Number : (850) 617-6381

From: Account Name : FASTKIT CORP  
Account Number : I201000000009  
Phone : (305) 599-0839  
Fax Number : (305) 592-9591

RECEIVED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2010 JUL 20 PM 12:56

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

FLORIDA PROFIT/NON PROFIT CORPORATION  
ARMITAGE CANINE, INC.

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$78.75

RECEIVED  
10 JUL 20 PM 2:11  
DIVISION OF CORPORATIONS

7/21/10

2010 JUL 20 PM 12:56

**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:

ARMITAGE CANINE, INC.

**ARTICLE II PRINCIPAL OFFICE**

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

6909 GATORBONE RD

KEYSTONE HEIGHTS, FL 32656

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

ANY AND ALL LEGAL 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):

HEATHER 6909 GATORBONE PRESIDENT

ARMITAGE RD KEYSTONE  
HEIGHTS, FL 32656

**ARTICLE VI REGISTERED AGENT**

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

HEATHER ARMITAGE

6909 GATORBONE RD

KEYSTONE HEIGHTS, FL 32656

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

HEATHER ARMITAGE

6909 GATORBONE RD

KEYSTONE HEIGHTS, FL 32656

\*\*\*\*\*

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

✓ Heather Armitage  
Signature/Registered Agent

7-20-10  
Date

✓ Heather Armitage  
Signature/Incorporator

7-20-10  
Date