

P10000097154

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

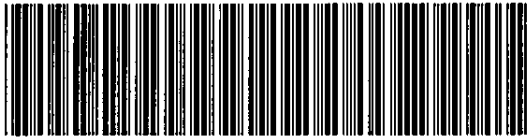
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12/2

COVER LETTER

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

SUBJECT: Sobe Puppies and Spa, 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: Alvaro D. Albuja

Name (Printed or typed)

830 - 5th Street

Address

Miami Beach, Fl, 33139

City, State & Zip

305-674-1070

Daytime Telephone number

sobepetshop@att.net ✓

E-mail address: (to be used for future annual report notification)

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TALLAHASSEE-FLORIDA

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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 Sobe Puppies and Spa, Inc.
The name of the corporation shall be:

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ARTICLE II PRINCIPAL OFFICE
Principal street address
830 - 5th Street
Miami Beach, Fl, 33139

Mailing address 2010 different P 2: 24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
Any lawful purpose.

ARTICLE IV SHARES
The number of shares of stock is 500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>Alvaro D. Albuja, Pres.</u>	Name and Title: _____
Address: <u>830 - 5th Street</u>	Address: _____
<u>Miami Beach, Fl, 33139</u>	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

ARTICLE VI REGISTERED AGENT

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

Name: Alvaro D. Albuja
Address: 830 - 5th Street
Miami Beach Fl 33139

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Alvaro D. Albuja
Address: 830 - 5th Street
Miami Beach Fl 33139

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

Alvaro Albuja 11/22/10
Required Signature/Registered Agent Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Alvaro Albuja 11/22/10
Required Signature/Incorporator Date