

P110000001560

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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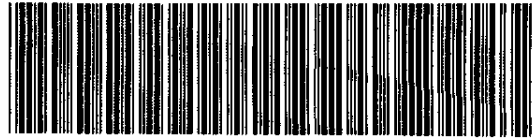
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATION
2011 JAN -5 PM 4:22

J. 1/6/11

COVER LETTER

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

SUBJECT: **PICCARD MEDS 4 PETS CORP.**

(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: **MARLON MARTINEZ**

Name (Printed or typed)

2203 MALLARD RD

Address

MIDDLEBURG, FL 32068

City, State & Zip

904-410-0214

Daytime Telephone number

PICCARDMEDS4PETS@ATT.NET

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

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

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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: PICCARD MEDS 4 PETS CORP

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ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address
2203 MALLARD RD
MIDDLEBURG, FL 32068

Mailing address, if different is: 2011 JAN - 5 PM 4: 23

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
PET STORE

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MARLON MARTINEZ P
Address: 2203 MALLARD RD
MIDDLEBURG, FL 32068

Name and Title: SAMANTHA G MARTINEZ SEC
Address: 2203 MALLARD RD
MIDDLEBURG, FL 32068

Name and Title: SARA MARTINEZ VP
Address: 2203 MALLARD RD
MIDDLEBURG, FL 32068

Name and Title: _____
Address: _____

Name and Title: MARLO MARTINEZ CFO
Address: 2203 MALLARD RD
MIDDLEBURG, FL 32068

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: MARLON MARTINEZ P
Address: 2203 MALLARD RD
MIDDLEBURG, FL 32068

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: MARLON MARTINEZ
Address: 2203 MALLARD RD
MIDDLEBURG, FL 32068

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

Required Signature/Registered Agent

1/1/2011

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.

Required Signature/Incorporator

1/1/2011

Date