P11000006910

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

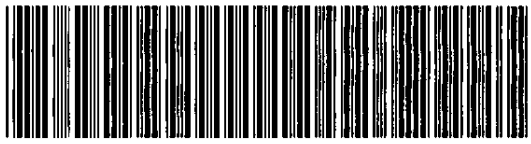
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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01/13/11--01011--022 **78.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 JAN 21 PM 3:15

W11-2604

# COVER LETTER

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

**SUBJECT:** EMERALD COAST K9 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: Deese Tax Accounting & Insurance Inc.
Name (Printed or typed)

725 Lake Geneva Drive
Address

St. Augustine FL 32092
City, State & Zip

904-230-8952
Daytime Telephone number

fdeese@att.net
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 14, 2011

DEESE TAX ACCOUNTING & INSURANCE INC.
725 LAKE GENEVA DRIVE
ST AUGUSTINE, FL 32092

SUBJECT: EMERALD COAST K9 INC.
Ref. Number: W11000002604

We have received your document for EMERALD COAST K9 INC. and your check(s) totaling $78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date is not acceptable since it is not within five working days of the date of receipt.

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 Supervisor
New Filing Section

Letter Number: 511A00001301

**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: EMERALD COAST K9 INC.

***ARTICLE II PRINCIPAL OFFICE***

Principal street address
418 CALHOUN AVE.
DESTIN FL 32541

Mailing address, if different is:
P.O. BOX 38
DESTIN FL 32540

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 JAN 21 PM 3:15

***ARTICLE III PURPOSE***

The purpose for which the corporation is organized is:
NEW BUSINESS ENTITY

***ARTICLE IV SHARES***

The number of shares of stock is: 100 @ $1.00 PAR VALUE PER SH

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

Name and Title: F. SCOTT MILLER PRESIDENT
Address: 418 CALHOUN AVE.
DESTIN FL 32541

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

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: F. SCOTT MILLER
Address: 418 CALHOUN AVE
DESTIN FL 32541

***ARTICLE VII INCORPORATOR***

The **name and address** of the Incorporator is:

Name: Deese Tax Accounting & Insurance Inc.
Address: 725 Lake Geneva Drive
Saint Augustine FL 32092

***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 — Date: 01-18-2011

***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 — Date: 01-18-2011