## P1200065879

(Requestor's Name)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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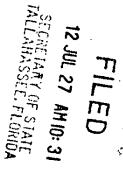
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## **COVER LETTER**

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

SUBJECT: DELIVERYDOGS INC.	
(PROPOSED CORPORA	TE NAME – <u>MUST INCLUDE SUFFIX</u> )
Enclosed are an original and one (1) copy of the arti	cles of incorporation and a check for:
\$70.00 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status  ADDITIONAL COPY REQUIRED
	ADDITIONAL COFT REQUIRED
FROM: DENZEL BLACK	e (Printed or typed)
8517 SEA HARBOR LAI	NE APT 203 Address
TEMPLE TERRACE, FI	LORIDA, 33697 - 35657 State & Zip
720-277-1778  Daytime T	elephone number
D.BLACK1924@GMAIL E-mail address: (to be use	COM d for future annual report notification)

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 NA The name of the corpor	DELIVERYDOGS INC.			
<u>8517</u>	Principal office Principal street address SEA HARBOR LANE APT 203 PLE TERRACE, FL, 33637	Mailing a	ddress, if different is:	
	RPOSE  I the corporation is organized is:  DELIVERY SERVICE		FILED RAW 27 M	
The number of shares of			E.F. S. S.	
Name and Title: Address:	ITIAL OFFICERS AND/OR DIRECTOR DENZEL BLACK-PRESIDENT 8517 SEA HARBOR LANE APT 203 TEMPLE TERRACE, FL, 33637	Name and Title: Address:		
Name and Title: Address:		Address:		
Name and Title: Address:	· · · · · · · · · · · · · · · · · · ·	_ Address:		
	GISTERED AGENT			
The <u>name and Florida</u> Name: Address:	street address (P.O. Box NOT acceptable) o DENZEL BLACK  8517 SEA HARBOR LANE  TEMPLE TERRACE, FL, 33637	f the registered agent is: -  -		
ARTICLE VII IN	CORPORATOR			
The name and address	s of the Incorporator is:			
Name: Address:	DENZEL BLACK 8517 SEA HARBOR LANE TEMPLE TERRACE, FL . 33637	- - -		
	s registered agent to accept service of proces miliar with and accept the appointment as reg	istered agent and agree to a		
1 Jen	Al Cools		7-24-12	
	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.				
// \	2/1/1/200		7-2412	
	Required Signature/Incorporator		<u>/-29-/2</u> Date	