506208 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.

(((H13000166496 3)))



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 : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255

Phone : (305)634-3694

Fax Number

; (305)633-9696

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

FLORIDA PROFIT/NON PROFIT CORPORATION DISTROPET, INC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

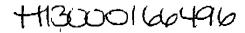
7/25/2013

https://efile.sunbiz.org/scripts/efileovr.exe

EWBIKE COKE

3696889908

01/25/2013 04:24





ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAM The name of the corporat	E DISTROPET, INC		FILED
ARTICLE II PRI	<u>NCIPAL OFFICE</u> Principal <u>street</u> address		address, if different is: SECRETARY OF STATE
HOLLYWOOD	D, FL 33019		TALLAHASSEE, FLORIDA
ARTICLE III PURS	POSE ne corporation is organized is: ANY AN	ND ALL LEGAL	BUSINESS
	IAL OFFICERS AND/OR DIRECTOR		SIDENT
	1379 HARBOR VIEW EAST	Name and Title: PRE	OIDLITT
Address	HOLLYWOOD, FL 33019		
Name and Title:		Name and Title:	
Address		Address:	
Name and Title:		Name and Title:	
Address		Address:	·

H13000166496

9696889908

413000166496

(conti.)

			FILED
	d Title;	_ Name and Title:	13 JUL 25 AM 10-44
Address		_ Address: _	SECRETARY OF STATE
			TALLAHASSEE, FLORIDA
		-	
ARTICLE VI	REGISTERED AGENT		
The <u>name and Fl</u>	orida street address (P.O. Box NOT acceptable) of	the registered ager	nt is:
Name:	ADAM GRANT		
Address:	1379 HARBOR VIEW EAST		
	HOLLYWOOD, FL 33019		
ARTICLE VII	INCORPORATOR		
he <u>name and ad</u>	dress of the Incorporator is:		
Name:	ADAM GRANT		
Address:	1379 HARBOR VIEW EAS		
	HOLLYWOOD, FL 33019		
iaving been nam	ned as registered agent to accept service of process	for the above state	ed corporation at the place designated in
	in familiar with and accept the appointment as regi	werea agent ana a	
			7/22/13
	Required Signature/Registered Agent		Date
submit this doci ocument to the L	unent and affirm that the facts stated herein are to Department of State constitutes a third degree felony	rue. I am aware ti as provided for in	hut the false information submitted in a s.817.155, F.S.
			7/22/13
	Required Signature/Incorporator		Date