

P140000087737

(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



600265714346

10/27/14--01018--010 **78.75

FILED

14 OCT 27 PM 2:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10/28/14

COVER LETTER

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

SUBJECT: Florida Pet Sitters and Dog Walkers, 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: Cheryl Williams
Name (Printed or typed)

14429 Barley Field Drive
Address

Wimauma, FL 33598
City, State & Zip

813-563-3538
Daytime Telephone number

info@floridapetsittersanddogwalkers.com
E-mail address: (to be used for future annual report notification)

FILED
14 OCT 27 PM 2:40
SECRETARY OF STATE
TALLAHASSEE, FL 32301

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

The name of the corporation shall be: Florida Pet Sitters and Dog Walkers, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

14429 Barley Field Drive
Wimauma, FL 33598

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Pet Sitting and Dog
Walking Service.

ARTICLE IV SHARES

The number of shares of stock is: 1,000

FILED
14 OCT 27 PM 2:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>Cheryl Williams, President</u>	Name and Title:	<u>Clevin Williams, VP</u>
Address	<u>14429 Barley Field Drive</u> <u>Wimauma, FL 33598</u>	Address:	<u>14429 Barley Field Drive</u> <u>Wimauma, FL 33598</u>
Name and Title:	<u>Cheryl Williams, Treas</u>	Name and Title:	<u>Cheryl Williams, Secretary</u>
Address	<u>14429 Barley Field Drive</u> <u>Wimauma, FL 33598</u>	Address:	<u>14429 Barley Field Drive</u> <u>Wimauma, FL 33598</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: Cheryl Williams

Address: 14429 Barley Field Drive
Wimauma, FL 33598

ARTICLE VII INCORPORATOR

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

Name: Cheryl Williams

Address: 14429 Barley Field Drive
Wimauma, FL 33598

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

Cheryl Williams

Required Signature/Registered Agent

10/24/14

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.

Cheryl Williams

Required Signature/Incorporator

10/24/14

Date

FILED
14 OCT 27 PM 2:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA