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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

: SMALL OFFICE BIG SERVICES INC Account Name

Account Number : 120140000022

Phone Fax Number : (786)683-0061 : (866)797-6507

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

##2FLORIDA PROFIT/NON PROFIT CORPORATION D & Y GROOMING-SPA INC

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786 631 4637

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

The name of the corporation shall be: ARTICLE II PRINCIPAL OFFICE Principal street address 10985 SW 7 ST		Mailing address	, if different is:
MIAMI, FL 33174			
	OSE GROC he corporation is organized is:	OMING AND SPA SERVICES	

			TO ED
ARTICLE IV SHAR. The number of shares of	ES 100 stock is:		9: 22: 7: 23
	IL OFFICERS AND/OR DIRECTOR		
	DANIEL A ISERN / PRESIDENT	Name and Title:	
Address	10985 SW 7TH STREET		

	MIAMI, FL 33174		
Name and Title			
Name and Title Address			
		Name and Title:	
Address		Name and Title:	
Address		Name and Title:Address:	

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SMALLOFFICEBIGSERVICES

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Name and	d Title:	Name and Title:
Address		Address:
	Prophysical Associations and the state of th	
	**************************************	4-1-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4
ARTICILE VI	REGISTERED AGENT	
The name and F	orida street address (P.O. Box NOT acceptable)	of the registered agent is:
Name:	DANIEL A ISERN	
Address:	10985 SW 7TH ST	
	MIAMI, FL 33174	
<u>ARTICLE VII</u>	INCORPORATOR	
The name and ac	ddress of the Incorporator is:	
Name:	SMALL OFFICE BIG SERVICES INC	
Address: 636 SW 1	636 SW 109 AVE	
	MIAMI, FL 33174	
Effective date, if	EFFECTIVE DATE: Other than the date of filing:	. (OPTIONAL)
(If an effective of days after the fi		not be more than five business days prior or 90 business
	e inserted in this block does not meet the applicateffective date on the Department of State's record	ole statutory filing requirements, this date will not be listed as
	am familiar with and accept the appointment as	
	They	9/8/2015
	Required Signature/Registered Agent	Date
	cument and affirm that the facts stated herein a Depurence of State constitutes a third degree fe	re true. I am aware that the false information submitted in a long as provided for in \$ 817.155. F.S.
	1.5	print 1
Redu	ired Signature/Incorporator	Date