## P16000037849

(Re	questor's Name)	
(Ad	dress)	
(Ad	idress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only

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SEGRETARY OF STATE
DIVISION OF COMPUNATION

## **COVER LETTER**

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

SUBJECT:	EXOTIC (PROPOSED CORPORATE			
Enclosed are an orig	inal and one (1) copy of the artic	cles of incorporation and	l a check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
		ADDITIONAL CO	T I REQUIRED	
FROM:	ELDA y. Santana Name (Printed of typed)			
	1009 A	V.W. Dopleddress	ace	
	Milmi City, S	State & Zip	3/1/2	
	Daytime Te	186-417-25 elephone number	585	
	E-mail address: (to be used	bell South for future annual report n	nut 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 NAME The name of the corporation shall be:	Exotic	Pet_	Grooming	Inc
ARTICLE II PRINCIPAL OFFICE Principal street addr	ress	Maili	U ng address, if different is:	
1009 N.W. 1 Mimi Florid	28 m Place		Sme	
Mimi Florid	a 33/82			
ARTICLE III PURPOSE  The purpose for which the corporation is org	anized is:			<del></del>
Any	and All	- Ban	rful Bus	<u>vnes</u>
			16 84 84	- SC
			3	
ARTICLE IV SHARES The number of shares of stock is:		_		E SPATE STATE OF STAT
ARTICLE V INITIAL OFFICERS AND	OR DIRECTORS			4
Name and Title: Ruben So			Presid Sme	en
Address 1 <u>009 N.u</u> Mimi F	). 128 pl Ad	ldress:	Same	<del>-</del>
Name and Title: Sever 0	Sablon Na	me and Title:	Vice- Presud	lent
Name and Title: Sergio  Address 12050  Mimm	2.00. 185 Cm Ad Cl 33177	ldress:	Some	
				<del></del>
Name and Title: Cla ( Address / 009 )	1. Sontona Na	me and Title:	Secretar	iy_
Address 1009	1.W. 128pl Ad	ldress:	Sone	
Moni &	1 33/12	-		

Address	Address:
	EGISTERED AGENT
	ida street address (P.O. Box NOT acceptable) of the registered agent is:
Name:	1000 Company
Address:	Mimi FL 33182
<u>ARTICLE VII IN</u>	CORPORATOR .
The <u>name and addi</u>	ress of the Incorporator is:
Name:	Ruben Sontana
Address:	1009 N.W. 128 PC
	Mimi Fl 33182
Effective date, if oth	
	serted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ctive date on the Department of State's records.
Having been name this certificate, I am	d as registered agent to accept service of process for the above stated corporation at the place designated in familiar with and accept the appointment as registered agent and agree to act in this capacity  4/22/20/6
	Required Signature/Registered Agent Date
document to the Dep	nent and affirm that the facts stated herein are true. I am aware that the false information submitted in a partment of State constitutes a third degree felony as provided for in s.817.155, F.S.  A Signature/Incorporator  Date
Require	. organical or most political

Name and Title:\_\_\_\_\_\_\_ Name and Title:\_\_\_\_\_\_\_