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COVER LETTER

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

SUBJECT:	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	d a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	& Certificate of Status
FROM: MA	ARLON E MARTINEZ Nam	e (Printed or typed)	
217	5 KINGSLEY AVE STE 301-302	Address	
OR.	ANGE PARK, FL 32073		
	City	, State & Zip	
305	-360-3856		
	Daytime 7	Telephone number	
MA	RLON@PICCARDMEDS4PETS.C	СОМ	
	E-mail address: (to be use	ed 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)

<u>ARTICLE II PRINC</u>	CIPAL OFFICE Principal street address	Mailing	addmone if different in
2175 KINGSLEY AVE	E STE 301-302	8758 SW 8TH ST	address, if different is:
ORANGE PARK, FL 3	22073	MIAMI, FL 3317	4
ARTICLE III PURPO The purpose for which to	OSE the corporation is organized is: REAL STA	TE INVESTMENTS	
			2016 SEC FALL
*********			≥≈ 2 " "
			ARY OF AM
			8 C
			200
ARTICLE IV SHAR The number of shares of	stock is:		æ∵' co
The number of shares of	Stock is: AL OFFICERS AND/OR DIRECTORS MARI ON E MARTINEZ DIRECTOR	Name and Title:	
The number of shares of	Stock is: AL OFFICERS AND/OR DIRECTORS MARI ON E MARTINEZ DIRECTOR	Name and Title:	
The number of shares of ARTICLE V INITL Name and Title	Stock is: AL OFFICERS AND/OR DIRECTORS MARLON E MARTINEZ DIRECTOR E:		
The number of shares of ARTICLE V INITL Name and Title	AL OFFICERS AND/OR DIRECTORS MARLON E MARTINEZ DIRECTOR 2175 KINGSLEY AVE STE 301-302		
The number of shares of ARTICLE V INITIA Name and Title Address	AL OFFICERS AND/OR DIRECTORS MARLON E MARTINEZ DIRECTOR 2175 KINGSLEY AVE STE 301-302	Address:	
The number of shares of ARTICLE V INITIA Name and Title Address	AL OFFICERS AND/OR DIRECTORS MARLON E MARTINEZ DIRECTOR 2175 KINGSLEY AVE STE 301-302 ORANGE PARK, FL 32073	Address:	
The number of shares of ARTICLE V INITL Name and Title Address Name and Title	AL OFFICERS AND/OR DIRECTORS MARLON E MARTINEZ DIRECTOR 2175 KINGSLEY AVE STE 301-302 ORANGE PARK, FL 32073	Address: Name and Title: Address:	
The number of shares of ARTICLE V INITIA Name and Title Address Name and Title Address	AL OFFICERS AND/OR DIRECTORS MARLON E MARTINEZ DIRECTOR 2175 KINGSLEY AVE STE 301-302 ORANGE PARK, FL 32073	Address: Name and Title: Address:	
The number of shares of ARTICLE V INITIA Name and Title Address Name and Title Address	AL OFFICERS AND/OR DIRECTORS MARLON E MARTINEZ DIRECTOR 2175 KINGSLEY AVE STE 301-302 ORANGE PARK, FL 32073	Address: Name and Title: Address:	

Name a	and Title:	Name and Title:
Addres		Address:
		
ARTICLE VI The name and 1	REGISTERED AGENT Florida street address (P.O. Box NOT acceptable)	of the registered agent is:
Name:	MARLON E MARTINEZ	2016 FALL
Address:	2175 KINGSLEY AVE STE 301-302	ECRE LLAFE
	ORANGE PARK, FL 32073	AUG 16 CRETARY LAHASSE
<u>ARTICLE VII</u>	INCORPORATOR	AUG 16 AM 8: 18 CRETARY OF STATE LAHASSEE, FLORIB
The <u>name and</u>	address of the Incorporator is:	
Name:	MARLON E MARTINEZ	
Address:	2175 KINGSLEY AVE STE 301-302	<u> </u>
	ORANGE PARK, FL 32073	
	EFFECTIVE DATE:	
	f other than the date of filing:	
days after the		not be more than five business days prior or 90 business
	te inserted in this block does not meet the applicab effective date on the Department of State's records	le statutory filing requirements, this date will not be listed as s.
Having been no this certificate, i	amed as registered agent to accept service of proce I am familiar with anti accept the appointment as i	
	L V W	<u> </u>
	Required Signature/Registered Agent	/ Date/
I submit this do	ocument and affirm that the facts stated herein as e Department of State constitutes a third degree fel	re true. I am aware that the false information submitted in
		1/2/16
Req	uired Signature Ancorporator	Date

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