

PI6000190679

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

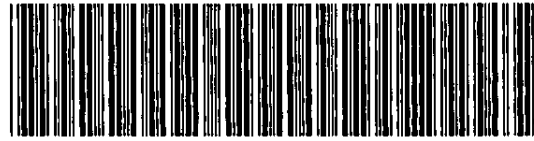
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

COVER LETTER

ATX1

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

**SUBJECT:** Douglas Kennels 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:** DOUGLAS KENNELS INC.

Name (Printed or typed)

239 Randle Ave.

Address

Oak Hill, Florida 32759

City, State & Zip

304-280-4749

Daytime Telephone number

douglaskennels@comcast.net

E-mail address: (to be used 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)

**ARTICLE I NAME**

The name of the corporation shall be: Douglas Kennels Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal **street** address

Mailing address, if different is:

239 Randle Ave.

\_\_\_\_\_

Oak Hill, FL 32759

\_\_\_\_\_

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Agricultural Services, Animal Specialty Services,

Specializing in Breeding, Racing, Boarding, Hauling, and Training of Greyhounds.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**ARTICLE IV SHARES**

The number of shares of stock is: 1,000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Joseph Douglas-President Name and Title: Dianna Douglas- Vice-President

Address: 239 Randle Ave. Address: 239 Randle Ave.

\_\_\_\_\_

\_\_\_\_\_

Oak Hill, FL 32759

Oak Hill, FL 32759

Name and Title: Joseph Douglas-Secretary Name and Title: Dianna Douglas- Treasurer

Address: 239 Randle Ave. Address: 239 Randle Ave.

\_\_\_\_\_

\_\_\_\_\_

Oak Hill, FL 32759

Oak Hill, FL 32759

Name and Title: Joseph Douglas- Director Name and Title: Dianna Douglas-Director

Address: 239 Randle Ave. Address: 239 Randle Ave.

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\_\_\_\_\_

Oak Hill, FL 32759

Oak Hill, FL 32759

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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: Gerald P. Jones CPA  
 Address: 13453 North Main Street Suite 201  
Jacksonville, FL 32218

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Dianna Douglas  
 Address: 239 Randle Ave.  
Oak Hill, FL. 32759

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)  
 (If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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*

*Gerald P. Jones, CPA* 12/17/16  
 Required Signature/Registered Agent 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.*

*Dianna Douglas* 12/17/16  
 Required Signature/Incorporator Date