

719000007831

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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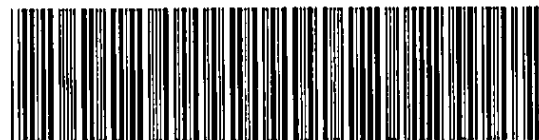
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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142
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COVER LETTER

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

SUBJECT: Fetching Canine, 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: Lorraine D. Powell

Name (Printed or typed)

6958 Aloma Ave.

Address

Winter Park, FL 32792

City, State & Zip

407.636.2925

Daytime Telephone number

gtlmgmt@gmail.com

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

The Agreement is for the SALE of the business Name- **FETCHING CANINE**

I Carmen Butler on this date 12-5-18

Am selling my business name titled above (Fetching Canine)

To Cynthia Wheaton on this date 12-5-18

For the amount of \$500.00

This amount has been agreed upon by both parties.

This purchase will include.

The Name **FETCHING CANINE**

- Window graphics.
- Building signs (side and back)
- Aluminum sign mounted to rented unit's roof front.
- All stationary printed (business cards, appointment cards, post cards, folding cards)
- Banners (photographer yearly advertisement banner)
- Reception printed logo sign board.
- Website
- Facebook

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: Fetching Canine, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
1490 W. State Road 434, Suite 100
Longwood, FL 32750

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any and all lawful business.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Cynthia Wheaton, President

Address: 106 Hadley Dr.
Sanford, FL 32771

Name and Title: Josh Wheaton, V.P.

Address: 106 Hadley Dr.
Sanford, FL 32771

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

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STATE OF FLORIDA
TALLAHASSEE

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: Cynthia Wheaton
Address: 1490 W. State Road 434, Suite 100
Longwood, FL 32750

ARTICLE VII INCORPORATOR

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

Name: Lorraine D. Powell
Address: 6958 Aloma Ave.
Winter Park, FL 32792

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STATE
TALLAHASSEE, FLORIDA

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 01/01/2019. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 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

Cynthia Wheaton, President
Required Signature/Registered Agent

01/23/19
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.

Lorraine D. Powell
Required Signature/Incorporator

01/23/19
Date