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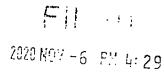


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Florida Department of State New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314



P.O. Box 6327	
Tallahassee, FL 32314	•
SUBJECT:	Barks and Bubbles Mobile Grooming, Inc. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)
To Whom It May Concern:	
Enclosed please find the or amount of \$70.00.	iginal and one copy of the Articles of Incorporation, together with my check in the
This represents the cost of corporation.	the Filing Fees and Fee for Registered Agent Designation for the above named
FROM:	Chrystal L. Card Individual's Name
	22 Sea Island Dr. S
	Address

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

(614) 203-8643 Daytime Telephone Number

Ormond Beach, FL 32176
City, State & Zip

## ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621 F.S. (Profit)

ARTICL	E I -	CORPOR	LATE	<b>NAME</b>
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The name of the corporation shall be:

2020 KOY -	6 PH	4:20
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ZIP

	•			11 41 5 3
<u> </u>	F	Barks and Bubbles Mobile G	rooming, Inc.	
	II - INITIAL PRINCIPA			
The stre	et address of the initial pri	ncipal office and, if different	t, the mailing address is:	
STREET	ADDRESS: 22 Sea Island I	Dr. S		
CITY	Ormond Beach	FLORIDA	ZIP 32176	
Mailing	g address, if different			· · · · · · · · · · · · · · · · · · ·

# <u>ARTICLE III - PURPOSE</u>

STREET ADDRESS

CITY

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

### ARTICLE IV - SHARES

The corporation is authorized to issue 100 shares of common stock.

Same as above

### ARTICLE V - INITIAL OFFICERS AND/OR DIRECTORS

This corporation shall have Two (2) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAME	Chrystal L. Card			
ADDRESS	22 Sea Island Dr. S			
CITY	Ormond Beach	STATE	FL	ZIP 32176
NAME	Jeffrey A. Tussing			
ADDRESS	22 Sea Island Dr. S			
CITY	Ormond Beach	STATE	FL	ZIP 32176
NAME				
ADDRESS				
CITY		STATE	FL	ZIP

### ARTICLE VI - REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

NAME	Chrystal L. Card		
ADDRESS	22 Sea Island Dr. S		
CITY	Ormond Beach	FLORIDA	ZIP 32176
DTICLE V	II - INCORPORATOR		
		ators signing these Articles of I	ncorporation are as follows:
NAME	Chrystal L. Card		
ADDRESS	22 Sea Island Dr. S		
CITY	Ormond Beach	STATE FL	ZIP 32176
	III - EFFECTIVE DATE  ate. if other than the date of	filing:	(OPTIONAL) be more than five days prior or 90
days after		muse be specific and cannot i	be more than rive days prior or 50
will not be	listed as the document's eff	ective date on the Department of	
			for the ablove stated corporation at the appointment as registered agent an
	t in this capacity.	J	3 0
agree to ac.	in inis cupucity.		

Required Signature / Registered Agent

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..

Required Signature / Incorporator

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