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Division of Corporations

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Florida Department of State  
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**FLORIDA PROFIT/NON PROFIT CORPORATION**  
**EXPERT GROOMING PET INC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

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23 MAR 21 PM 12:30  
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TALLAHASSEE, FLORIDA



March 21, 2023

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

DOCUMENT PLANET INC

SUBJECT: EXPERT GROOMING PET INC  
REF: W23000038457

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Genesis R Kersey  
OPS Clerk

FAX Aud. #: B23000105194  
Letter Number: 923A00006498

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TALLAHASSEE, FLORIDA

# 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: Expert Grooming Pet Inc.

## ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address: 631 East 64 Street  
Hialeah FL 33013.

Mailing address, if different is: \_\_\_\_\_

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is: \_\_\_\_\_

## ARTICLE IV SHARES

The number of shares of stock is: 100

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Janet CIOFFI (P) Name and Title: \_\_\_\_\_

Address: 631 East 64 st Address: \_\_\_\_\_  
Hialeah FL 33013.

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

Address: \_\_\_\_\_ Address: \_\_\_\_\_

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

Address: \_\_\_\_\_ Address: \_\_\_\_\_

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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: Janet Cioffi  
 Address: 631 East 64 street  
Hialeah FL 33013

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Janet Cioffi  
 Address: 631 East 64 street  
Hialeah FL 33013

**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 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*

x Janet Cioffi

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.*

x Janet Cioffi

Required Signature/Incorporator

Date

03-18-2023

03-18-2023

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 23 MAR 2023  
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