

P98000003866

TRANSMITTAL LETTER

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

900002400709--9  
-01/15/98--01002--001  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

SUBJECT: FAUNA FUN FERRERAS INC.  
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of Incorporation and a check  
for :

☒ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate

☐ \$122.50  
Filing Fee  
& Certified Copy

☐ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

Additional Copy Required

FROM: Pablo Rodriguez  
Name (printed or typed)

310 1/2 S BURNBY  
Address

ORLANDO FL 32803  
City, State & Zip

407-896-7921  
Daytime Telephone number

FILED  
98 JAN 13 AM 7:49  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

B. REGISTER JAN 14 1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

January 6, 1998

BEST QUICK TAX RETURNS INC.  
310 1/2 S BUMBY  
ORLANDO, FL 32803

SUBJECT: FAUNA FUN FEEDERS INC.  
Ref. Number: W98000000215

We have received your document for FAUNA FUN FEEDERS INC., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$122.50.

The fees for profit and nonprofit, domestic or foreign are as follows:

Filings Fees:	\$35.00
Registered Agent	
Designation	\$35
Certified Copy	\$52.50
Total Fee Due	\$122.50

Please list the street address of each officer/director. If the officer/director does not have a street address, list a P.O. Box and write (N/A) beside the box number.

Please return the original and one copy of 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) 487-6919.

Beth Register  
Corporate Specialist Supervisor

Letter Number: 798A00000411

## ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

### ARTICLE I NAME

FAUNA FUN FEEDERS INC

### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

5828 DONNELLY CIR  
ORLANDO, FL 32821

### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 shares common stock-no par value  
ALBERTO S COBIAN

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ALBERTO S COBIAN  
5828 DONNELLY CIR  
ORLANDO, FL 32821

### ARTICLE V INCORPORATORS

The name and street address of the incorporator to these Articles of Incorporation is:

Pablo Rodriguez, CPA  
310 1/2 S. Bumby

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Orlando, FL 32803

#### ARTICLE VI DIRECTORS

The company will be run by the board of directors. The directors are:

ALBERTO S COBIAN

LARITSSA P COBIAN

#### ARTICLE VII OFFICERS

ALBERTO S COBIAN-PRESIDENT

LARITSSA P COBIAN-VICE PRESIDENT

ALBERTO S COBIAN-SECRETARY

ALBERTO S COBIAN-TREASURER

#### ARTICLE IX NATURE OF BUSINESS

The Corporation can engage in any lawful activity permitted in the United States , The State of Florida or any other state, country, territory or nation.

The undersigned Incorporator has executed these Articles of Incorporation this 1 day of JANUARY 1997.

  
signature

Address for:

ALBERTO S COBIAN

5828 DONNELLY CIR

ORLANDO, FL 32821

ADDRESS FOR:  
LARITSSA P COBIAN  
5828 DONNELLY CIR  
ORLANDO, FL 32821

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE  
UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF  
FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED  
OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: FAUNA FUN FEEDERS INC.

2. The name and address of the registered agent and office is:

ALBERTO S COBFAW  
(NAME)

5828 DONNELLY CIR  
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

ORLANDO FL 32821  
(CITY/STATE/ZIP)

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TALLAHASSEE, FLORIDA

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

  
(SIGNATURE)

1/1/98  
(DATE)