

TRANSMITTAL LETTER

P98000075610

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

200002628102--0
-08/28/98-01002-009
****131.25 ****131.25

SUBJECT: BEST FRIENDS Co.
(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: MARGARET WIENHOLD, OWNER
Name (Printed or typed)

2301 Seventh Ave., N.
Address

St. Pete, FL 33713
City, State & Zip

813-321-9459
Daytime Telephone number

FILED
98 AUG 27 AM 7:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Margaret GIVE
AUTHORIZATION BY SIGNING TO
CORRECT None
DATE 9-1-98
DOC. EXAM FC

REGISTERED AUG 31 1998

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

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

The name of the corporation shall be:

BEST FRIENDS Co. OF CENTRAL FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

2301 Seventh Ave. N.
St. Petersburg FL 33713

ARTICLE III SHARES

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

200

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

MARGARET WIENHOLD, OWNER
SAME AS ABOVE

ARTICLE V INCORPORATOR

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

MARGARET WIENHOLD, OWNER
SAME AS ABOVE
Margaret Wienhold

Signature/Incorporator

Date

(An additional article must be added if an effective date is requested.)

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

Margaret Wienhold

Signature/Registered Agent

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA