APPROVED AND FILED

HOLLI SULLIVAN INDIANA SECRETARY OF STATE 11/30/2021 03:05 PM

ARTICLES OF INCORPORATION

Formed pursuant to the provisions of the Indiana Code.

ARTICLE I - NAME AND PRINCIPAL OFFICE ADDRESS

BUSINESS ID 202111301545448

BUSINESS TYPE Domestic Nonprofit Corporation

BUSINESS NAME

BISCUIT FACTORY ANIMAL RESCUE, INC.

PRINCIPAL OFFICE ADDRESS

2116 Alexandria Dr, Greenfield, IN, 46140, USA

ARTICLE II - REGISTERED OFFICE AND ADDRESS

REGISTERED AGENT TYPE Individual

NAME Susan K. Schlundt

ADDRESS 2116 Alexandria Dr, Greenfield, IN, 46140, USA

SERVICE OF PROCESS EMAIL schluns@gmail.com

I acknowledge that the Service of Process email provided above is the email address at which electronic service of process may be accepted.

ARTICLE III - PERIOD OF DURATION AND EFFECTIVE DATE

PERIOD OF DURATION Perpetual
EFFECTIVE DATE 11/30/2021
EFFECTIVE TIME 02:01PM

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ARTICLE IV - GOVERNING PERSON INFORMATION

TITLE President

NAME Susan Schlundt

ADDRESS 2116 Alexandria Dr, Greenfield, IN, 46140, USA

TITLE Vice President

NAME Vada Cramer-Burrus

ADDRESS 5301 W 950 N, Carthage, IN, 46115, USA

TITLE Treasurer
NAME Jacque Ivancic

ADDRESS 1959 Freedom Court, Greenfield, IN, 46140, USA

TITLE Secretary

NAME Megan Montgomery

ADDRESS 2367 Longleaf Lane, Greenfield, IN, 46140, USA

TITLE co-chair

NAME Nickole Finch

ADDRESS 2367 Longleaf Lane, Greenfield, IN, 46140, USA

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ARTICLE V - INCORPORATOR(S)

NAME Susan Schlundt

ADDRESS 2116 Alexandria Dr, Greenfield, IN, 46140, USA

NAME Vada Cramer-Burrus

ADDRESS 5301 W 950 N, Carthage, IN, 46115, USA

NAME Jacque Ivancic

ADDRESS 1959 Freedom Court, Greenfield, IN, 46140, USA

NAME Megan Montgomery

ADDRESS 2367 Longleaf Lane, Greenfield, IN, 46140, USA

NAME Nickole Finch

ADDRESS 2367 Longleaf Lane, Greenfield, IN, 46140, USA

ARTICLE VI - GENERAL INFORMATION

STATEMENT OF PURPOSE

Providing care and support of homeless animals from orphaned neonates to adults. Managed through spay/neuter programs, shelter diversion, rehoming assistance, strategic partnerships and community education.

TYPE OF CORPORATION Public benefit corporation, which is organized for a public or charitable purpose

WILL THE CORPORATION HAVE MEMBERS? Yes

DISTRIBUTION OF ASSETS

Upon Dissolution of the rescue any remaining assets and/or monies will be distributed to a partner rescue organization

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SIGNATURE

THE SIGNATOR(S) REPRESENTS THAT THE REGISTERED AGENT NAMED IN THE APPLICATION HAS CONSENTED TO THE APPOINTMENT OF REGISTERED AGENT.

THE UNDERSIGNED, DESIRING TO FORM A CORPORATION PURSUANT TO THE PROVISIONS OF THE INDIANA NONPROFIT CORPORATION ACT, EXECUTE THESE ARTICLES OF INCORPORATION.

IN WITNESS WHEREOF, THE UNDERSIGNED HEREBY VERIFIES, SUBJECT TO THE PENALTIES OF PERJURY, THAT THE STATEMENTS CONTAINED HEREIN ARE TRUE, THIS DAY November 30, 2021.

THE UNDERSIGNED ACKNOWLEDGES THAT A PERSON COMMITS A CLASS A MISDEMEANOR BY SIGNING A DOCUMENT THAT THE PERSON KNOWS IS FALSE IN A MATERIAL RESPECT WITH THE INTENT THAT THE DOCUMENT BE DELIVERED TO THE SECRETARY OF STATE FOR FILING.

SIGNATURE Susan K. Schlundt
TITLE Incorporator

Business ID: 202111301545448

Filing No: 9232348