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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

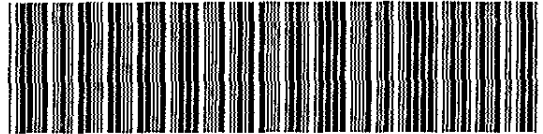
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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PET SUPERMARKET®

September 24, 2003


Mr. Clifford G. Maine
Miller, Johnson, Snell & Cumiskey, P.L.C.
Calder Plaza Buidling
250 Monroe Avenue NW, Suite 800
Grand Rapids, Michigan 49501-0306

Re: West Air, LLC

Dear Mr. Maine:

Enclosed is the requested signed Articles of Organizations for West Air, LLC. Also enclosed is a check for \$125,00. If you need any additional information, please let me know.

Sincerely,



Ms. Diane E. Holtz
President & Chief Financial Officer

Enclosure

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PET SUPERMARKET, INC.

13700 N.W. 2ND STREET * SUNRISE, FL 33325 * TELEPHONE: 954-351-0834 * FAX: 954-351-0897

MILLER, JOHNSON, SNELL & CUMMISKEY, P.L.C.

Attorneys and Counselors

SEP 19 2003

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250 MONROE AVENUE NW, SUITE 800
P.O. BOX 306
GRAND RAPIDS, MICHIGAN 49501-0306
616.831.1700

TTT MERITAS LAW FIRMS WORLDWIDE

September 18, 2003

VIA FEDERAL EXPRESS

Ms. Diane Holtz
President/Chief Financial Officer
Pet Supermarket, Inc.
13700 NW 2nd Street
Sunrise, FL 33325

Re: West Air, LLC

Dear Diane:

As we discussed, enclosed for your review and execution are Articles of Organization for West Air, LLC.

After you've had a chance to review the Articles, please sign your name on page 1 as registered agent and on page 2 as president of Pet Supermarket, Inc. Then, forward the executed Application along with your check payable to the Florida Department of State in the amount of \$125 to the Registration Section. I've enclosed a letter and a Federal Express envelope to the Registration Section for delivery on Monday.

If you have any questions, please don't hesitate to contact me.

Very truly yours,

MILLER, JOHNSON, SNELL & CUMMISKEY, P.L.C.

Cheryl A. Stricklen

By

Cheryl A. Stricklen
Legal Assistant

CAS/ld
Enclosures
Cc: Clifford G. Maine

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

West Air, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

13700 NW 2nd Street

Sunrise, Florida 33325

Mailing Address:

13700 NW 2nd Street

Sunrise, Florida 33325

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Diane E. Holtz

Name

13700 NW 2nd Street

Florida street address (P.O. Box NOT acceptable)

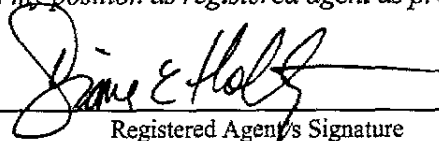
Sunrise

FL

33325

City, State, and Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company 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 as provided for in Chapter 608, F.S.



Registered Agent's Signature

(CONTINUED)

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ARTICLE IV- Manager(s) or Managing Member(s):

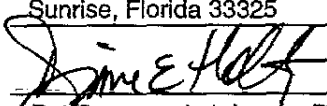
The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM	Pet Supermarket, Inc.
	13700 NW 2nd Street
	Sunrise, Florida 33325
	
	Pet Supermarket, Inc. by Diane E. Holtz, Pres

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:


Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Pet Supermarket, Inc. by Diane E. Holtz, President

Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

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STATE OF FLORIDA

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