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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 |
| Special Instructions to Filing Officer: |

Office Use Only



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SECRETARY OF STATE
ALLAHASSEF F



| ACCOUNT NO.: 072100000032 | | | |
|--|--|--|--|
| REFERENCE: 224403 4327098 | | | |
| AUTHORIZATION: | | | |
| COST LIMIT : \$ 125.00 | | | |
| Smell of cons | | | |
| ORDER DATE: September 12, 2007 | | | |
| ORDER TIME : 12:09 PM | | | |
| ORDER NO. : 224403-005 | | | |
| CUSTOMER NO: 4327098 | | | |
| | | | |
| DOMESTIC FILING | | | |
| NAME: PET ANGEL WORLD SERVICES | | | |
| (FLORIDA), LLC | | | |
| PREECUTIVE DAME. | | | |
| EFFECTIVE DATE: | | | |
| ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP | | | |
| XX ARTICLES OF ORGANIZATION | | | |
| PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: | | | |
| CERTIFIED COPY | | | |
| XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING | | | |
| | | | |
| CONTACT PERSON: Jeanine Reynolds - EXT. 2933 | | | |
| EXAMINER'S INITIALS: | | | |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| a), LLC mpany, "L.L.C.," or "LLC.") al office of the Limited Liability Company in all office of the Limited Liability |
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| al office of the Limited Liability Company is alloging Address: Brookmont Drive |
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| ce, & Registered Agent's Signature: gent. You must designate an individual or another |
| ered agent are: |
| Company |
| |
| |
| |
| P.O. Box <u>NOT</u> acceptable) |
| P.O. Box <u>NOT</u> acceptable) 32301 |
| gen |

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..

| Corporation Service Company By: | Jeanine Reynolds |
|------------------------------------|------------------|
| Registered Agent's Signature (REO | UIRED) |

(CONTINUED)
Page 1 of 2

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 MGR Paul Gelinas 37 Brookmont Drive Wilbraham, MA 01095 (Use attachment if necessary)

REQUIRED SIGNATURE:

to or 90 days after the date of filing.)

ARTICLE V: Effective date, if other than the date of filing: _

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

(If an effective date is listed, the date must be specific and cannot be more than five business days prior

. (OPTIONAL)

(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.)

Paul Gelinas - Manager

Typed or printed name of signee

Filing Fees:

\$125,00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30,00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)