

L080000056404

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

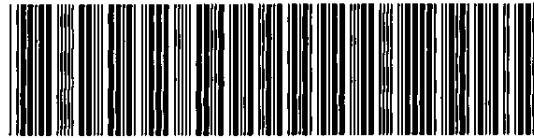
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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08 JUN -9 AM 11:27

FLORIDA  
TALLAHASSEE, FLORIDA  
DIVISION OF REVENUE

FILED

08 JUN -9 PM 1:45

FLORIDA  
TALLAHASSEE, FLORIDA  
DIVISION OF REVENUE

B. KOHR

JUN - 9 2008

EXAMINER

## ATTORNEYS' TITLE

Requestor's Name

1965 Capital Circle NE, Suite A

Address

Tallahassee, Fl 32308

850-222-2785

City/St/Zip

Phone #

## CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1- A DOG'S DREAM DAY CARE, LLC

2-

3-

4-

☒ Walk-in

☐ Pick-up time ASAP

☒ Certified Copy

☐ Mail-out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	Non-Profit
<input checked="" type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

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TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION OF  
A DOG'S DREAM DAYCARE, LLC  
a Florida Limited Liability Company**

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08 JUN -9 PM 1:45  
TALLAHASSEE, FLORIDA

The undersigned, being authorized to execute and file these Articles of Organization, hereby certifies that:

**ARTICLE I  
Name of Company**

The name of the limited liability company (hereinafter referred to as the "Company") is: **A Dog's Dream Daycare, LLC.**

**ARTICLE II  
Address of Company**

The mailing address and street address of the principal office of the Company is: 2520 Davis Boulevard, Suite B, Naples, Florida 34104.

**ARTICLE III  
Registered Agent and Office**

The name of the Company's initial registered agent in Florida is: Jill Schaus; and the address of the Company's registered agent in Florida is: 2520 Davis Boulevard, Suite B, Naples, Florida 34104.

Dated this 6 day of June, 2008.

  
Jill Schaus, sole Member

### ACCEPTANCE BY REGISTERED AGENT

Having been named as registered agent to accept service of process for the above-stated Company, at the place designated in these Articles of Organization, the undersigned, Jill Schaus, hereby agrees to act as registered agent, and states that the undersigned is familiar with, and accepts, the obligations of registered agent as provided for under applicable Florida statutes.

Dated this 6 day of June, 2008.

By: Jill Schaus  
Jill Schaus