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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

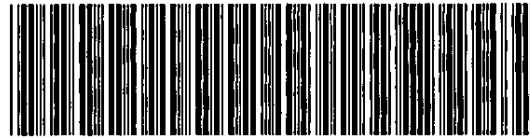
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2014 JUN 16 AM 10:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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JUN 17 2014

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 5, 2014

DAKOTA ROUTH
6208 S. ORANGE AVE #108
ORLANDO, FL 32809

SUBJECT: FREAK OFF MY LEASH LLC
Ref. Number: W14000034929

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2014 JUN 16 AM 10:42

We have received your document for FREAK OFF MY LEASH LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammi Cline
Regulatory Specialist II

Letter Number: 714A00012113

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: FREAK OFF MY LEASH LLC
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

DAKOTA ROUSH
Name of Person

FREAK OFF MY LEASH LLC
Firm/Company

6208 S. ORANGE AVE #108
Address

ORLANDO, FL 32809
City/State and Zip Code

DAKOTAC@FREAKPRINT.COM
E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2014 JUN 16 AM 10:42

FILED

For further information concerning this matter, please call:

DAKOTA ROUSH at (407) 212-8163
Name of Contact Person Area Code Daytime Telephone Number

MAILING ADDRESS:
Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:
Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

- \$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status \$155.00 Filing Fee & Certified Copy \$160.00 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. FREAK OFF MY LEASH LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C." or "LLC.")

2. INDIAHO 3. _____
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. N/A
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 6208 S. ORANGE AVE #108
ORLANDO, FL 32809
(Street Address of Principal Office)

6. SAME
(Mailing Address)

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SECRETARY OF STATE
TALLAHASSEE
FLORIDA

7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

DAKOTA BOUTH - OWNER: 6537 LAKE PEMBROKE PL
ORLANDO, FL 32829

8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)



Signature of an authorized person

(In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

DAKOTA BOUTH

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

FREAK OFF My LEASH LLC

If unavailable, the alternate to be used in the state of Florida is:

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

DAKOTA ROUTH

(Name)

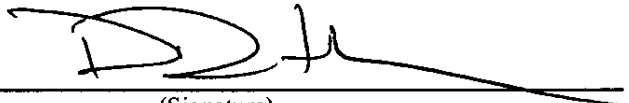
6208 S. ORANGE AVE #108

Florida Street Address (P.O. Box NOT ACCEPTABLE)

ORLANDO, FL 32809

City/State/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 605, Florida Statutes.



(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

2014 JUN 16 PM 0:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

State of Idaho

Office of the Secretary of State

CERTIFICATE OF EXISTENCE

OF

FREAK OFF MY LEASH LLC

File Number W-128430

I, BEN YSURSA, Secretary of State of the State of Idaho, hereby certify that I am the custodian of the limited liability company records of this State.

I FURTHER CERTIFY That the records of this office show that the above-named limited liability company filed a certificate of organization in Idaho on 8/20/2013.

I FURTHER CERTIFY That the limited liability company's certificate of organization has not been dissolved.

Dated: 6/12/2014 11:24 AM



Ben Yursa
SECRETARY OF STATE