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8/20/14

NAME:

PET SERVICES OPERATING, LLC

TYPE OF FILING: APPLICATION

COST:

160.00

RETURN: CERTIFIED COPY AND GOOD STANDING PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

TO: Registration Section Division of Corporations
Pet Services Operating, 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:
Willie Dorssers
Name of Person
VIP PetCare, LLC
Firm/Company
5813 Skylane Blvd.
Address
Windsor, CA 95492
City/State and Zip Code
wdorssers@vippetcare.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Willie Dorssers 620-2264
Name of Contact Person Area Code Daytime Telephone Number
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301
Enclosed is a check for the following amount: \$\Begin{array}{cccccccccccccccccccccccccccccccccccc

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 : FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	tO REG	ISTER A
Pet Services Operating, LLC		
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LL.C.," or "LLC.")	 	_
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must in Liability Company." "L.L.C." or "L.C.")	reludo "Li	_ mited
_{2.} Delaware 3. 27-4119036		
(Jurisdiction under the law of which foreign limited liability (PEI number, if applicable) company is organized)		
4. 08/04/2014		
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)		_
5. 5813 Skylane Blvd.	I s	<u>_</u>
Windsor, CA 95492	ECN.	AU(
(Street Address of Principal Office)	75.5	3 20
_{6.} 5813 Skylane Blvd.	SEC.	
Windsor, CA 95492	FLS	AH IO:
(Mailing Address)	RE	: 97
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/	'are:	1
Will Santana, CEO - 5813 Skylane Blvd., Windsor, CA 95492		
Ken Pecoraro, CFO - 5813 Skylane Blvd., Windsor, CA 95492		_
		_
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by having custody of records in the jurisdiction under the law of which it is organized. (A photocopy acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of must be submitted)	y is not	

Signature of an authorized person

(In accordance with section 605 0203, F.S., the execution of this document constitutes an afternation under the penalties of perjury that the facts stated berein are true. I am aware that any talse information submitted in a document to the Department of State constitutes a third degree fellowy as provided for in 8 817,155, F.S.)

Willie Dorssers, Director of Finance

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 Pet Services Operation		;	
If unavailable, the alternate to be us		: :	
2. The name and the Florida street	address of the registered agent	t and office are:	
Jennifer Co	otoia		
	(Name)		
5308 Paylo	r Ln.		
Florida :	Street Address (P.O. Box NOT ACC	EPTABLE) :	
Sarasota	FL 34240	:	
	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 Designation of Registered Agent \$ 25.00

\$ 30.00 Certified Copy (optional)

Certificate of Status (optional) 5.00

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "PET SERVICES OPERATING, LLC" IS

DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN

GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF

THIS OFFICE SHOW, AS OF THE NINETEENTH DAY OF AUGUST, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PET SERVICES OPERATING, LLC" WAS FORMED ON THE TWENTY-NINTH DAY OF NOVEMBER, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

4865175 8300

141088060

AUTHENTICATION: 1632430

DATE: 08-19-14

You may verify this certificate online at corp.delaware.gov/authver.shtml