

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 19, 2003 8:00 am
Secretary of State

05-19-2003 90070 026 ****50.00

DOCUMENT # L02000033727

1. Entity Name

TOYS4PETZ, LLC



DO NOT WRITE IN THIS SPACE

10105267

2. Principal Place of Business

216 Third Avenue

3. Mailing Address

216 Third Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Melbourne Beach, FL

City & State

Melbourne Beach

4. FEI Number

☒ Applied For
☐ Not Applicable

Zip

32951

Country

USA

Zip

FL

Country

32951

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Incorporate USA, Inc.

Street Address (P.O. Box Number is Not Acceptable)

3150 Sandy Ridge Drive

City

Clearwater

FL

Zip Code

33758

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

J M Twigg J M TWIGG

5.14.03

DATE

FEE IS \$50.00

Make Check Payable to Florida Department of State

DUE BY MAY 1

9. MANAGING MEMBERS / MANAGERS

TITLE

MGRM

NAME

Judith M. Twigg

STREET ADDRESS

216 Third Avenue

CITY - ST - ZIP

Melbourne Beach, FL 32951

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

MGRM

NAME

Christopher J. R. Twigg

STREET ADDRESS

216 Third Avenue

CITY - ST - ZIP

Melbourne Beach, FL 32951

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

MGRM

NAME

Robin J. C. Twigg

STREET ADDRESS

321 Wayne Avenue

CITY - ST - ZIP

Indianapolis, FL 32903

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

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CITY - ST - ZIP

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

J M Twigg J. M. TWIGG

5.14.03 321.951.2273

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone # X104

CR2E083B (12/02)