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LIMITED LIABILITY COMPANY

Every Critter Pet Sitter, LLC

Certificate of Status	0
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Page Count	03
Estimated Charge	\$155.00

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**ARTICLES OF ORGANIZATION
OF
Every Critter Pet Sitter, LLC**

ARTICLE I NAME

The name of the limited liability company shall be: Every Critter Pet Sitter, LLC

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 8530 Snowfire Drive, Orlando, Florida 32818.

ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Jessica Owens, 8530 Snowfire Drive, Orlando, Florida 32818. Located in the County of Orange.

ARTICLE IV DURATION

The duration for the limited liability company shall be: 12/31/2044.


ARTICLE V MANAGERS/MEMBERS

The management of the limited liability company is reserved for the Members and the name and address of the member of the Limited Liability Company is:

Jessica Owens, 8530 Snowfire Drive, Orlando, Florida 32818

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APPROVED
AND
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Business Filings Incorporated, Organizer
Mark Schiff, AVP
Authorized Representative

Prepared by Mark Schiff, Business Filings Incorporated, 8025 Excelsior Dr., Suite 200,
Madison, WI 53717
(608) 827-5300

FAX AUDIT # 4040000 351 713

FORM 78101

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CERTIFICATE OF DESIGNATION OF REGISTERED
AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES,
THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE
STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN
DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE
STATE OF FLORIDA.

The name of the limited liability company is: **Every Critter Pet Sitter, LLC**

The name and address of the registered agent and office is: Jessica Owens, 8530
Snowfire Drive, Orlando, Florida 32818. Located in the County of Orange.

Having been named as registered agent and to accept service of process for the above
stated 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.

Signature: Jessica Owens
Jessica Owens

Date: February 11, 2004

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TALLAHASSEE, FLORIDA

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