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2004 JUL 29 P L: Oh

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JECRETAR TOLLANASS	GF STATE E.FLORIGORIUM
(Requestor's Name)	
(Address)	900037502899
(Address)	900037302099
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	06/14/0401053006 **125
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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TRANSMITTAL LETTER FILED

TO: Registration Section
Division of Corporations

10 th 10 to 10 to

SUBJECT: MAXIMUS hus kennels LL CLLAHASSEE FICTION (Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Dennis A. Martin (Name of Person)		
MAX: Mus hus Kennels (Sirm/Company)		
114 Apollo St. (Address)		
Port St. Toc FL 324575 (City/State and Zip Code)		

For further information concerning this matter, please call:

Dennis A-Martin at (850) 227-4035 (B)

(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS: Registration Section

Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE Glenda E. Hood

Glenda E. Hood Secretary of State FILED

2014 JUL 29 P 14: 04
SECRETARY OF STATE
THE LAHASSEE, FLORINA

June 16, 2004

DENNIS A. MARTIN 114 APOLLO ST. PORT ST. JOE, FL 32456

SUBJECT: MAXIMUS HUS KENNELS LLC

Ref. Number: W04000023277

We have received your document for MAXIMUS HUS KENNELS LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 245-6094.

Agnes Lunt Document Specialist

Letter Number: 404A00040318

ARTICLES OF ORGANIZATION FOR

FILED

FLORIDA LIMITED LIABILITY COMPANY JUL 29 P 4: 04

ARTICLE I - Name: The name of the Limited Liability Company is:	TALLAHASSEE, FLORIDA
Maximus hus Kennels Ll	<u>.</u>
ARTICLE II - Address: The mailing address and street address of the princip	al office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
114 Apollo St.	114 Apollo St.
Port St. Joe FL	Port St. Jac FL
32456	32457
ARTICLE III - Registered Agent, Registered Offi The name and the Florida street address of the regist Name 14 Apollo St Florida street address (P.O. Box Port St. Joe City, State, and Zi	NOT acceptable)

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 608, Florida Statutes.

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

FILED ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: ZIM JUL 29 P 4:04 Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member (Use attachment if necessary) NOTE: An additional article must be added if an effective date is requested. REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Filing Fees:

\$100.00 Filing Fee for Articles of Organization \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)