

W4 000064986

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

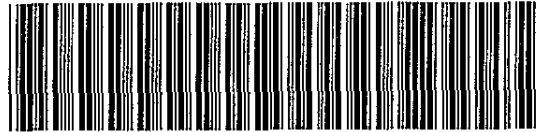
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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W4-64986
AL

22 James Street #4
Brookline, MA 02446
August 24, 2004

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

Re: Pet Partners of Cypress Creek, LLC and L Sprinkle, LLC

Dear Sir or Madam:

Enclosed please find Articles of Organization to register the above-referenced LLCs in Florida.

We have also requested a certified copy of our filing, as well as a Certificate of Status. We have included the fees for a certified copy of the Articles, Certificate of Status, and the designation of Registered Agent along with the filing fee for the articles of Organization.

If you have any questions, or need anything further, please do not hesitate to contact me at 617-734-2577. Thank you.

Very truly yours,


Lance Sprinkle

enclosure

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TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Pet Partners of Cypress Creek, LLC
(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:

Lance Sprinkle

(Name of Person)

(Firm/Company)

22 James Street #4

(Address)

Brookline, MA 02446

(City/State and Zip Code)

For further information concerning this matter, please call:

Lance Sprinkle

(Name of Person)

at (617) 734-2577
(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

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TALLAHASSEE, FLORIDA

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**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

Pet Partners of Cypress Creek, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

25227 State Road 54

Lutz, FL 33559

Mailing Address:

22 James Street #4

Brookline, MA 02446

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Lance Sprinkle

Name

12232 Little Road

Florida street address (P.O. Box **NOT** acceptable)

Hudson

FLORIDA 34667

City, State, and 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 608, Florida Statutes..



Registered Agent's Signature

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TALLAHASSEE, FLORIDA

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ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Pet Partners, LLC


236 Sherwood Farm Road

Brookline, MA 02446

(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.)

Lance Sprinkle

Typed or printed name of signer

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)

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TALLAHASSEE, FLORIDA

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