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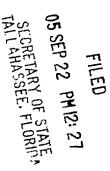
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| Certified Copies | _ Certificates | of Status | | |
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| Special Instructions to | Filing Officer: | | | |
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Office Use Only



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COVER LETTER

| TO: Registration Section Division of Corporation | | | | | |
|--|---|---|--|----------|--------------------|
| SUBJECT: COOL | DOG, LLC (Name of Limited | Liability Company) | | | |
| The enclosed Articles of C | Organization and fee(s) are su | bmitted for filing. | | | |
| Please return all correspon | idence concerning this matter | to the following: | | | |
| JAMES G | REGORY MA | AUZY Name of Person) | · | | |
| COOL DO | OG, LLC | Firm/Company) | | | |
| 103 S O | SCEOLA AVE | ESUITE 2 | | <u> </u> | • |
| ORLANDO FLORIDA 32801 | | | | | |
| (City/State and Zip Code) | | | | | |
| For further information co | ncerning this matter, please of | call: | | | |
| JAMES GREC | GORY MAUZY | at (407) 310 45 (Area Code & Daytime Tel | 62 | | |
| (Name of | Person) | (Area Code & Daytime Ter | epnone Number) | | |
| Enclosed is a check for | the following amount: | | | SECI |)5 S |
| | \$130.00 Filing Fee & Certificate of Status | \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) | ▼ \$160.00 Filing Certificate of Status Certified Copy (additional copy is encl | FEASSER, | 05 SEP 22 PM 12: 2 |
| | Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center C Tallahassee, FL 32301 | s | FLORIN | 12:27 |

ARTICLE I - Name: The name of the Limited Liability Company is:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

COOL DOG, LLC (Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

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

| Principal Office Address: | Mailing Address: |
|---------------------------|---------------------------|
| 103 S OSCEOLA AVE SUITE 2 | 103 S OSCEOLA AVE SUITE 2 |
| ORLANDO FLORIDA 32801 | ORLANDO FLORIDA 32801 |
| | |

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

FOSTER ALGIER 103 S OSCEOLA AVE SUITE 2 Florida street address (P.O. Box NOT acceptable) **ORLANDO** _{FL} 32801 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, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED) Page 1 of 2

JAMES GREGORY MAUZY 103 S OSCEOLA AVE SUITE 2 ORLANDO FLORIDA 32801

(Use attachment if necessary)

Title:

MGRM

"MGR" = Manager

"MGRM" = Managing Member

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

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

Name and Address:

ARTICLE V: Effective date, if other than the date of filing: _______. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.)

JAMES GREGORY MAUZY

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

5.00 Certificate of Status (Optional)