# L0700017999

(R	equestor's Name)		
(Address)			
(Address)			
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PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	Certificates	s of Status	
Special Instructions to Filing Officer:			
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SFFECTIVE DATE 2/10/07

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SECRETARY OF STATE
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### FLORIDA DEPARTMENT OF STATE Division of Corporations

February 7, 2007

SHAWNA ROMKEY 111 PINESONG DR CASSELBERRY, FL 32707

SUBJECT: PUDGY PETS, LLC Ref. Number: W07000006449

O7 FEB 15 PM 1: 29

We have received your document for PUDGY PETS, LLC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return the original and one copy of 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) 245-6855.

Tammy Hampton Document Specialist New Filing Section

Letter Number: 707A00009373

## **COVER LETTER**

	on Section of Corporations		
SUBJECT:	Pudgy PE7S, (Name of Limite	LLC	
	(Name of Limite	d Liability Company)	
The enclosed Artic	eles of Organization and fee(s) are s	ubmitted for filing.	
Please return all co	rrespondence concerning this matte	er to the following:	
	SHAWNA	Romkey Name of Person)	
	(1	Name of Person)	
. <u>-</u> .	Pubby	PETS LLC	
	′ (	Firm/Company)	
	111 Pinesone	OR (VE (Address)	
<u></u>	CASSElberry A	FL 32707 (State and Zip Code)	
,	(City)	(State and Zip Code)	
For further informa	ation concerning this matter, please	call:	
SHAWNA	Romkey Name of Person)	at ( <u>467</u> ) <u>&gt;54</u> -	2262
(1	Name of Person)	(Area Code & Daytime To	elephone Number)
Enclosed is a che	ck for the following amount:		
□ \$125.00 Filing	Fee \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	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 Tallahassee, FL 32301	ns



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

ARTICLE I - Name: The name of the Limited Liability Company	is:
Pudgy PE75, LLC  Must end with the words "Limited Liability Company, "Lin	mitad Company" or their abbreviation "LLC" or "LC"
	inned company of their abbreviation (EEC, or E.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:
111 PinesonG DRIVE Cosselberry, IEL 32707	(ASSELDERAY, FL 32707
	red Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another
The name and the Florida street address of th	Pomker  Orive  address (P.O. Box NOT acceptable)  FL 32207  Port Residence of the service of the
SHAWNA	Romkey HASSE FIL
	me Sil 5 [
III PinesonG	Drive P. T
_	address (P.O. Box NOT acceptable)
City, State	FL 32207 ATT F

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

# The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGRLUISA CARRILLO 111 PARESONG DRIVE CHSSElbarry, IFL 32207 (Use attachment if necessary) **ARTICLE V:** Effective date, if other than the date of filing: $\frac{2/10/2007}{}$ (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

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)

that the facts stated herein are true.)

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

\$ 5.00 Certificate of Status (Optional)

SHAWNA ROMKEY