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To: Division of Corporations  
Fax Number : (850) 205-0383

From: Account Name : EMPIRE CORPORATE KIT COMPANY  
Account Number : 072450003255  
Phone : (305) 634-3694  
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FLORIDA/FOREIGN LIMITED LIABILITY CO.

the pet weekender, llc

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

ARTICLE I - Name of Limited Liability Company:

**THE PET WEEKENDER, LLC**

ARTICLE II - Mailing Address & Street Address of Limited Liability Company:

**2713 POINTE CIRCLE  
WEST PALM BEACH, FL 33413**

ARTICLE III - Registered Agents Name, Office Address, & Registered Agents Signature:

**CHRISTINA PARKES  
2713 POINTE CIRCLE  
WEST PALM BEACH, FL 33413**

*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...*

*Christina Parkes*

Registered Agent's Signature

Date 06-14-2007

Article IV - Management (Check box if applicable.)

☒ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company. Specify name & address(es).

**MARTIN CLAY  
2713 POINTE CIRCLE  
WEST PALM BEACH, FL 33413**

**CHRISTINA PARKES  
2713 POINTE CIRCLE  
WEST PALM BEACH, FL 33413**

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*Christina Parkes*

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.

**CHRISTINA PARKES**  
Typed or printed name of signee

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