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| (Bus | iness Entity Na | me) |
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| Certified Copies | Certificate | s of Status |
| Special Instructions to F | iling Officer: | |
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Office Use Only

G. MCLEOD

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DIVISION OF CORPORATION

COVER LETTER

Registration Section
Division of Corporations

TO:

| . SUBJECT: PETS R US 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: |
| MARK LINDNER AND NICOLE HEINE (Name of Person) |
| PETS R US (Firm/Company) |
| 2950 IMMOKALEE ROAD SUITE 3 |
| MAPLES, FL 34110 (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| MARK LINDIVER at (239) 593-5008 (Name of Person) (Area Code & Daytime Telephone Number) |
| Enclosed is a check for the following amount: |
| \$125.00 Filing Fee \$\times 130.00 Filing Fee \& Certificate of Status \$\times 25.00 Filing Fee \& Certified Copy (additional copy is enclosed) \$\times 25.00 Filing Fee \& 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 Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 |

Mark L. Lindner

Land Investments

Sand Castle Realty Group 2950 Immokalee Road, Suite 4 Naples, Florida 34110 (239) 593-5008, Fax (239) 593-5168

Facsimile Transmission

To:

GINA

Fax: 850245-6030

From:

Mark Lindner

Fax: (239) 593-5168

Date:

4/24/08

Subject:

LLC

Pages:

4

Thank You!
This is to change PETS R US LLC
TO ROYAL CREATURES Deliane LLC

COVER LETTER

TO:

Registration Section
Division of Corporations

SURJECT: _ ROYAL CILEATURES BEHAVE 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:

| MARK LINGUER AND NICOLE HEINE |
|---|
| (Name of Porson) |
| KOYAL CREATURES BEHAVE LLC (Firm/Company) |
| 2950 IMMORALEE ROAD SUITE 3 |
| (Address) |
| NAPLES FL 34110 |
| (City/State and Zip Code) |

For further information concerning this matter, please call:

| MARK LINDINER | at (239) | 573-5008 |
|------------------|------------|-----------------------------|
| (Name of Person) | (Area Code | & Daytime Telephone Number) |

Enclosed is a check for the following amount:

\$125.00 Filing Fee \$\times \text{\$130.00 Filing Fee & Certificate of Status}

S155.00 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 Corporations
Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE 1 - Name: The name of the Limited Liability Company is: | |
|---|---------------------------------|
| ROYAL CREATURES BEHAVE LLC (Must and with the words "Limited Liability Company, "L.L.C.," or "LLC.") | |
| ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Com- | pany is: |
| Principal Office Address: Mailing Address: | |
| 2950 IMMORALET ROAD #3 SAME. VAPLES, FL 34110 | |
| 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: MARIC LEADNER. | DIVISION OF 1 |
| 2206 MAJESTIC COURT N | 5656 5756 5756 |
| Florida street address (P.O. Box <u>NOT</u> acceptable) | SE SE |
| City, State, and Zip | ATTO: |
| Having been named as registered agent and to accept service of process for the above stated liability company at the place designated in this certificate, I hereby accept the appointme registered agent and agree to act in this capacity. I further agree to comply with the provision statutes relating to the proper and complete performance of my duties, and I am familiar we accept the obligations of my position as registered agent as provided for In Chapter 608, | ent as ons of all oth and |

(CONTINUED)
Page 1 of 2

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

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

| <u>Title:</u> "MGR" = Manager "MGRM" = Managing Member | Name and Address: |
|--|--|
| MGRM | NICOLE HÉINE 222 HARBOUR DRIVE #307 NAPLES, FL 34103 |
| MGRM | MARK LINDNER 2206 MAJESTIC COURT N NAPLES, FL 34110 |
| | |
| | |
| (Use attachment if necessary) | |

ARTICLE V: Effective date, if other than the date of filing: Flas 1476. (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.)

MARK LINDNER

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)