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Special Instructions to I	Filing Officer:	
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Office Use Only



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Effective Date 4/15/1)

DIVISION OF CORPORATION

T. HAMPTON MAR 2 a 2011

EXAMINER

COVER LETTER

	f Corporations			
SUBJECT: V.1.	P GROOMING			
SOBOLC I.		ed Liability Comp	oany	
The enclosed Articl	es of Organization and fee(s) are	submitted for filing	ıg.	
Please return all cor	respondence concerning this mat	ter to the followin	g:	
JESSI	CA SMITH			
		Name of Person		
		Firm/Company		
7342 B	ROAD ST			
		Address		
BROOK	SVILLE, FL 34601			
<u> </u>		y/State and Zip Coc	le	
vip_groo	ming@yahoo.com E-mail address: (to be used i	for future annual rer	ort notification)	
For further informat	ion concerning this matter, please		,	
	-	z can.		
Jessica Smith		_ _{at (} 352	_)_556-865 ²	
Na	ame of Person	Area Cod	le & Daytime Te	lephone Number
Enclosed is a chec	k for the following amount:			
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Fili Certified Co (additional co		\$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	Registra Division Clifton I 2661 Ex	Courier Addression Section of Corporation Building ecutive Center see, FL 32301	ns

Effective Date 4/15/11

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

V.I.P GROOMING LLC

(Must end 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 Company is:

Principal Office Address:

Mailing Address:

7342 BROAD ST

BROOKSVILLE, FL 34601

8398 BELMONT RD

SPRING HILL, FL 34606

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:

JESSICA SMITH

Name

8398 BELMONT RD

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

SPRING HILL

... 34606

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..

egistered Agent's signature (REQUIRED

(CONTINUED)

Page 1 of 2

SECRETARY OF STATIONS
DIVISION OF CORPORATIONS

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

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

MGRM	JESSICA SMITH
	8398 BELMONT RD
	SPRING HILL, FL 34606
<u> </u>	
(Use attachment if necessary	')
	04/45/0044
	r than the date of filing: 04/15/2011 (OPTIONA e must be specific and cannot be more than five business day

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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

JESSICA SMITH

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)