| (Re                     | questor's Name)   |             |
|-------------------------|-------------------|-------------|
| (Ad                     | dress)            |             |
| (Ad                     | dress)            |             |
| (Cit                    | y/State/Zip/Phone | e #)        |
| PICK-UP                 | ☐ WAIT            | MAIL        |
| (Bu                     | siness Entity Nar | me)         |
| (Do                     | cument Number)    |             |
| Certified Copies        | _ Certificates    | s of Status |
| Special Instructions to | Filing Officer:   |             |
|                         |                   |             |
|                         |                   |             |
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T. HAMPTON EXAMINER

# **COVER LETTER**

|                                   | ion Section<br>of Corporations  |  |  |
|-----------------------------------|---|--|--|
| <sub>subject:</sub> Ber           | njamin's Pet Hut, Ll  | _C   |  |
| Name of Limited Liability Company |   |  |  |
|                                   |   |  |  |
| The enclosed Artic                | les of Organization and fee(s) are  | submitted for filing.  |  |
| Please return all co              | rrespondence concerning this ma   | ter to the following:  |  |
| Victoria                          | a Fournier  |  |  |
|                                   |   | Name of Person   |  |
| Benjar                            | nin's Pet Hut, LLC  |  |  |
|                                   |   | Firm/Company   |  |
| 215 Sc                            | outh Tamiami Trail  |  |  |
|                                   |   | Address  |  |
| Venice                            | Florida 34285   |  |  |
| <u> </u>                          |   | ty/State and Zip Code  |  |
| vicki@po                          | owerloo.com   |  |  |
| <del></del>                       | E-mail address: (to be used   | for future annual report notification)   |  |
| For further informa               | tion concerning this matter, pleas  | e call:  |  |
| Victoria Fourr                    | nier  | at ( 248 ) 444-0051  |  |
| N                                 | ame of Person   | Area Code & Daytime Telephone Number   |  |
| Enclosed is a chec                | ck for the following amount:  |  |  |
| \$125.00 Filing Fee               | \$130.00 Filing Fee & Certificate of Status   | \$155.00 Filing Fee & \$160.00 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

| The name of the Limited Liability Company is:   |
|---|
| Benjamin's Pet Hut, 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 |

| Mailing Address:        |
|-------------------------|
| 215 South Tamiami Trail |
| Venice, Florida 34285   |
|                         |

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:

**ARTICLE I - Name:** 

| Curt Four | nier   |
|-----------|--|
|           | Name   |
| 332 Shore | Road   |
|           | Florida street address (P.O. Box NOT acceptable) |
| Venice    | FL 34285   |
|           | 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

## 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" = Manage "MGRM" = Manage |  |  |
|--|--|--|
| MGRM   | Curt R. Fournier 332 Shore Road Venice, FL 34285   |  |
| MGRM   | Victoria D. Fournier  332 Shore Road  Venice, FL 34285   |  |
|  |  |  |
|  |  |  |
|  | e, if other than the date of filing: (OPTIONAL I, the date must be specific and cannot be more than five business days |  |
| <u>REQUIRED</u> SIG                          | NATURE:  |  |

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. 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.)

Victoria D. Fournier

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)