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D. BRUCE FEB 2 8 2012-EXAMINER

COVER LETTER

TO: Registration of	on Section Corporations					
_{SUBJECT:} Wal	k'nWag LLC					
	Name of Limite	ed Liability Compa	ny		_	
The enclosed Article	es of Organization and fee(s) are s	submitted for filing				
Please return all corr	respondence concerning this matte	er to the following:				
<u>Pamela</u>	a Lanzi					·
		Name of Person				
Walk'n	Wag LLC					
		Firm/Company				
126 Se	a Island Lane					-
		Address			2	
Boca Ra	ton, Florida 33431			A H	83	
<u>Bood Ra</u>		/State and Zip Code		\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ 	27	
płanzi1@				THE THE	3	
	E-mail address: (to be used for	or future annual repor	rt notification)	STAT STAT	- Cuista	
For further informat	ion concerning this matter, please	call:		ĒM	ල් ම	
Pamela Lanzi		at (561	212-6517			
Na	ime of Person	Area Code	& Daytime Telephone	Number		
Enclosed is a chec	k for the following amount:					
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Certified Cop (additional copy	y Cer is enclosed) Cer	60.00 Filing rtificate of Strified Copy ditional copy is	tatus &	
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registration Division of Clifton Bu 2661 Exec	urier Address on Section of Corporations			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:					
The name of the Limited Liability Company is:					
Walk'nWag LLC					
(Must end with the words "Limited Liabili	ity Company, "L.L.C.," or "LLC.")				
ARTICLE II - Address:					
The mailing address and street address of the pri	incipal office of the Limited Liability Company is:				
Principal Office Address:	Mailing Address:				
126 Sea Island Lane	126 Sea Island Lane Boca Raton, FL 33431				
Boca Raton, FL 33431					
	· · · · · · · · · · · · · · · · · · ·				
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	Office, & Registered Agent's Signature: ered Agent. You must designate an individual of another 2				
The name and the Florida street address of the re	egistered agent are:				
Pamela Lanzi					
Name	PLANT CA				
126 Sea Island La	ane Richard				
Florida street add	ress (P.O. Box NOT acceptable)				

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..

City, State, and Zip

Registered Agent's Signature (REQVIRED)

Boca Raton

(CONTINUED)

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 Membe	Name and Address:
Manager	Pamela Lanzi 126 Sea Island Lane Boca Raton, Florida 33431
	
(Use attachment if necessary)	
	nan the date of filing: (OPTIONAL) nust be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	17
4	amela Lanzi E T
Signature of a	member or an authorized representative of a member.
constitutes an affirmation I am aware that any fals	ion 608.408(3), Florida Statutes, the execution of this document on under the penalties of perjury that the facts stated herein are true. e information submitted in a document to the Department of State e felony as provided for in s.817.155, F.S.)
Pamela L	
	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)