L12000106743

(Ke	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	∋ #)
PICK-UP	MAIT WAIT	MAIL
(Bu	ısiness Entity Nan	ne)
(,	,
(Da	ocument Number)	
(DC	cument Number)	
,		
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



900238526029

08/17/12--01020--014 **130.00

12 AUG 17 AM 10: LI SECRETARY OF STATE

The Law Office of SYLVIA NOEL WHITE, P.A. 201 DOUGLAS AVENUE, SUITE B DUNEDIN, FLORIDA 34698 (727) 735-0645

S. NOEL WHITE CHRISTOPHER N. GIULIANA, OF COUNSEL FAX:(727) 735-9375 E-mail:snoelwh@aol.com

August 14, 2012

Florida Department of State Registration Section, Division of Corporations Post Office Box 6327 Tallahassee, Florida 32314

Re: WOOF OF SAFETY HARBOR, LLC

Dear Sir or Madam:

Enclosed for filing are the original of the Articles of Organization and the Designation of Registered Agent for WOOF OF SAFETY HARBOR, LLC, a new Florida limited liability company.

Also enclosed is a check for \$130.00 to cover the filing fee for the Articles (\$100), the filing fee for the Designation of Registered Agent (\$25), and the fee for a Certificate of Status (\$5).

Please forward to me your letter of acknowledgment and the Certificate of Status.

If you have any questions or comments, please contact me.

Sincerely,

S. Noel White

Attorney at Law

ARTICLES OF ORGANIZATION OF WOOF OF SAFETY HARBOR, LLC 12 AUG 17 AM 10: 12-1

The undersigned certify that we have associated ourselves together for the purpose of becoming a limited liability company under the laws of the State of Florida, providing for ATE the formation, rights, privileges, and immunities of limited liability companies for profit. We ORIDA further declare that the following Articles shall serve as the Charter and authority for the conduct of business of the limited liability company.

ARTICLE I NAME AND MAILING ADDRESS & STREET ADDRESS OF PRINCIPAL OFFICE

The name of the limited liability company shall be WOOF OF SAFETY HARBOR, LLC, [hereinafter the "Company"] and its principal office's street address shall be 1209 Roxbury Drive, Safety Harbor, FL 34695 and its mailing address shall be P.O. Box 1403, Safety Harbor, FL 34695, but it shall have the power and authority to establish branch offices at any other place or places as the members may designate.

ARTICLE II PURPOSES AND POWERS

The Company is established and authorized to engage in any lawful activity and business. In addition to the powers authorized by the laws of the State of Florida for limited liability companies, the general nature of the business or businesses to be transacted, and which the limited liability company is authorized to transact, the Company shall possess all the powers which an individual possesses to carry out its affairs and businesses.

ARTICLE III MEMBERSHIP RESTRICTIONS

Members shall have the right to admit new members as provided in the Company's Operating Agreement as amended from time to time. A member's interest in the Company may not be sold, assigned or otherwise transferred except as provided in the Company's Operating Agreement, as amended from time to time. On the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member, or the occurrence of any other event that terminates the continued membership of a member in the Company, the remaining members shall have the right to continue the business as provided in the Company's Operating Agreement as amended from time to time.

ARTICLE IV

This Company shall exist perpetually, or until dissolved in a manner provided by law, or as provided in the Operating Agreement adopted by the members.

ARTICLE V INITIAL REGISTERED AGENT

The name and address of the initial Registered Agent of the limited liability company is KAREN BARTOSZEK, 1209 Roxbury Drive, Safety Harbor, FL 34695.

ARTICLE VI MANAGING MEMBERS

BILLIAN	TOING MEMBERG
The name and address of each Mana	iging Member is as follows:
Title	Name and Address
"MGR" - Manager "MGRM" - Managing Member	
MGRM	KAREN BARTOSZEK 1209 Roxbury Drive Safety Harbor, FL 34695
	members of the limited liability company, certify proposed Articles of Organization of WOOF OF
Executed by the undersigned at on	8/8 , 2012.
KAREN BARTOSZEK	
affirmation under the penalties of perjury that	da Statutes, the execution of this document constitutes an the facts stated herein are true. I am aware that any false epartment of State constitutes a third degree felony as
KARI	EN BARTOSZEK
Typed or	r printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT WOOF OF SAFETY HARBOR, LLC, A Florida Limited Liability Company

I hereby certify that the name and Florida street address of the Registered Agent for WOOF OF SAFETY HARBOR, LLC, a Florida Limited Liability Company, is:

> KAREN BARTOSZEK 1209 Roxbury Drive Safety Harbor, FL 34695

KAREN BARTOSZEK, Member

ACCEPTANCE BY REGISTERED AGENT

Having been named as Registered Agent and to accept service of process for WOOF OF SAFETY HARBOR, LLC, a Florida 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 609, Florida Statutes.

KAREN BARTOSZEK Registered Agent