# L12000/136/8

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### **COVER LETTER**

TO:

**Registration Section** 

Division of Corp	porations				
SUBJECT: OAKLA	AND PET REAL	TY, LLC			
		ed Liability Company	, , , , , , , , , , , , , , , , , , ,		
The enclosed Articles of G	Organization and fee(s) are	submitted for filing.			
Please return all correspon	ndence concerning this mat	ter to the following:			
Anna M. V	Volfe				
		Name of Person		£,	
Oakland P	et Realty, LLC				
· · · · · · · · · · · · · · · · · · ·		Firm/Company			
610 Fox Ti	rail SW				
		Address			
Vero Beach,	Florida 32962			⊒'s	
		y/State and Zip Code		TLA ROI	2
boydcap@be		or future annual report notification)			75 - H
		•		138.0 138.0	£
For further information co	oncerning this matter, please	e call;	·	100	7
Anna M. Wolfe		at ( 772 ) 299-0570	r		<del>ا</del> ا
Name of	Person	Area Code & Daytime Telep	ohone Number	Z-(*:	ď
Enclosed is a check for	the following amount:			•	
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing For Certificate of State Certified Copy (additional copy is en	us &	
	Mailing Address Registration Section Division of Corporations P.O. Box 6327	Street/Courier Address Registration Section Division of Corporations Clifton Building			

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	R	Т	ŀ	C	L	E	I	-	Γ	V	a	m	e	
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The name of the Limited Liability Company is:

## OAKLAND PET REALTY, 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:	
610 Fox Trail SW	610 Fox Trail SW	
Vero Beach, Florida 32962	Vero Beach, Florida 32962	
ARTICLE III - Registered Agent, R (The Limited Liability Company cannot serve as its business entity with an active Florida registration.	egistered Office, & Registered Agent's Sis own Registered Agent. You must designate an individual	ignature:
The name and the Florida street addres	ss of the registered agent are:	RYO SSEE
Samuel A. Bloo	k, P.A.	1- 01 1- 01
	Nama	つだ

Name

1555 Indian River Blvd. Ste. B-125

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

Vero Beach

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:

MGR/PRES	Anna M. Wolfe			
	610 Fox Trail SW			
	Vero Beach, Florida 32962			
SEC/TREA	James B. Wolfe	•		
	610 Fox Trail SW			
	Vero Beach, Florida 32962		_,	
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			活動した。	
(Use attachment if necessary)			10 s	

#### **REQUIRED SIGNATURE:**

Signature of a member or an outhorized representative of a member

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.)

Samuel A. Block
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)