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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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Effective Date 10-22-12

10/25/12--01011--007 **130.00

2012 OCT 25 KM & 20
SECRETARY OF STAIR

J. SAULSBERRY EXAMINER

OCT 29 2012

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: PREPPY RIPPYS LLC	
Name of Limited Liability Company	
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
CARL J. GAROFALO Name of Person	
Name of Felson	
Eigen/Company	
Firm/Company	
2721 S. PALM AIRC DR. Address	
Address	
POMPANO BEACH FL 33068 City/State and Zip Code CARLO PREPPY PUPPYS. Com E-mail address: (to be used for future annual report notification)	
City/State and Zip Code	
City/State and Zip Code CALL PREPPYPUPPYS. Com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:	77
E-mail address: (to be used for ruture annual report nonneation)	Ti
For further information concerning this matter, please call:	Pragram
	Ti
Name of Person Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$125.00 Filing Fee & Certificate of Status St	
Mailing Address Street/Courier Address Pariety tion Section Registration Section	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability (Company is:
PREPPY	PUPPYS LLC
(Must end with the words	"Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street addr	ess of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:

2721 S. PALM AIRE DR.
POMPANO BEACH, FL
73069

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:

CARL J. GAROFALO

Name

2721 S. PALM AIRE DR.

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

POMPANO BLACH, FL 33065

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Membe	Name and Address:
MGRM	THERESA CHAVEZ GAROFALO 2721 S. PALM AIRE Dr. POMPANO BLACH, RE 33069
MGRM	CARL J. GARDIALO 2721 S. PALM AIRE DA. POMPANO BEACH, FL 33069
	·
(Use attachment if necessary) (LE V: Effective date, if other to ffective date is listed, the date is days after the date of filing.)	han the date of filing: $\frac{10/22/200}{200}$. (OPTIONAL) must be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	ATTANTAMA SEEE
Signature of a	member or an authorized representative of a member.

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)