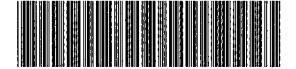
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SEGRETARY OF STATE

JAN 17 2013



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 16, 2013

FREDERICK LOWE LOWE LAW GROUP L.L.C. 107 SOUTH BRADFORD AVENUE TAMPA, FL 33609

SUBJECT: ARATANA HAJIMARI L.L.C.

Ref. Number: W13000003242

We have received your document for ARATANA HAJIMARI L.L.C. and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on January 15, 2013. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammi Cline Regulatory Specialist II

Letter Number: 513A00001267

COVER LETTER

	egistration Section ivision of Corporations	
SUBJEC	Aratana Hajimari	
SUBJEC	Name of Limited Liability Company	
The enclo	ed Articles of Organization and fee(s) are submitted for filing.	
Please ret	rn all correspondence concerning this matter to the following:	
	Frederick T. Lowe	
	Name of Person	
	Lowe Law Group L.L.C	
	Firm/Company	
	107 South Bradford Avenue	
	Address	
	Tampa, Florida 33609	
	City/State and Zip Code	
	BusinessEtAl@gmail.com	
	E-mail address: (to be used for future annual report notification)	
For furthe	information concerning this matter, please call:	
Mrs.	MaDonna McDonald at 310 867.5230 Area Code & Daytime Telephone Number Area Code & Daytime Telephone Number	
	Name of Person Area Code & Daytime Telephone Number	
Enclosed	is a check for the following amount: Filling Fee & Q\$130.00 Filling Fee & Q\$155.00 Filling Fee & Q\$160.00 Filling Fee.	انوش انوشا
□\$125.00	Filing Fee \$\square\$\$130.00 Filing Fee & \$\square\$\$\$155.00 Filing Fee & \$\square\$\$\$\$\$\$\$160.00 Filing Fee, \$\square\$\$\$\$\$	
4 \$125.00	Filing Fee \$\sum \\$130.00 \text{ Filing Fee & } \sum \\$155.00 \text{ Filing Fee & } \sum \\$160.00 \text{ Filing Fee, } \text{ Certificate of Status } \text{ Certified Copy } \text{ (additional copy is enclosed)}	**************************************
	Mailing Address Street/Courier Address	

Mailing Address
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 Comp	any is:	
Aratana H	lajimari L.L.C	
(Must end with the words "Limit	ed Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address o	f the principal office of the Limit	ed Liability Company is:
Principal Office Address:	Mailing Address:	
1215 Plant Ave	P.O. Box 2496	
Lakeland Florida 33805	Eagle Lake Florida 33839	
ARTICLE III - Registered Agent, Reg (The Limited Liability Company cannot serve as its ov business entity with an active Florida registration.)		
The name and the Florida street address	of the registered agent are:	
Mr. Fre	derick T. Lowe Esq.	
	Name	
107 Sc	outh Bradford Avenue	
Florida s	treet address (P.O. Box NOT acceptabl	c)
Υ	ampa, _{FL} 33609	
	City, State, and Zip	
Having been named as registered agent liability company at the place designaregistered agent and agree to act in this all statutes relating to the proper and and accept the obligations of my position.	ted in this certificate, I hereby acc capacity. I further agree to comp complete performance of my duties in as registered agent as provided	cept the appointment as ply with the provisions of s, and I am familiar with
Fred	erick Lowe	
	s Signature (REQUIRED) ONTINUED)	2013 JAN 15 SEGRETARY C
n.	om 1 of 3	

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	Name and Address:
"MGRM" = Managing Member	•
5 5	
MGR / Trustee	Mrs. MaDonna McDonald as Trustee
•	P.O. Box 2496
•	Eagle Lake Florida 33839
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LE V: Effective date, if other than the fective date is listed, the date must or 90 days after the date of filing.) REOUIRED SIGNATURE: Signature of a member (In accordance with section 60)	LADONNA McDonald er or an authorized representative of a member. 8.408(3), Florida Statutes, the execution of this document
LE V: Effective date, if other than the fective date is listed, the date must or 90 days after the date of filing.) REOUIRED SIGNATURE: Signature of a member of	Laborna McDonald er or an authorized representative of a member. 8.408(3), Florida Statutes, the execution of this document or the penalties of perjury that the facts stated herein are true. mation submitted in a document to the Department of State
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