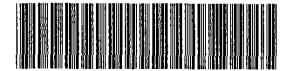
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

COVER LETTER

Division of Corporations
SUBJECT: Gentle Paws 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:
Carla MacDonnell RDMS Name of Person Carla MacDonnell RDMS Name of Person Carla MacDonnell RDMS
Name of Person Name of Person Name of Person Name of Person
Gentle Paws LLC
6312 Blackberry Lane
6312 Blackberry Lane
Address
Lakewood Ranch FL 34202 City/State and Zip Code
City/State and Zip Code
CWStar @ tampabay.vr. (orn E-mail address: (To be used for future annual reportablification)
For further information concerning this matter, please call:
Carla MacDonnell at (941), 730-5382 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
.\$125.00 Filing Fee \$130.00 Filing Fee & \$155.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
Mailing Address Registration Section Division of Corporations P.O. Box 6327 Street/Courter Address Registration Section Division of Corporations Division of Corporations Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:
(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:
6312 Blackberry Lane 6312 Blackberry Lane Lakewood Ranch, FL34202 Lakewood Ranch, FL34202
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Limbility 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:
Carla MacDonnell, RDMS
Florida street address (P.O. Box NOT acceptable) Lakewad Ranh 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.

(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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
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The state of the s		TALL
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(Use attachment if necessary)		
	t be specific and cannot be more than five business	
REQUIRED SIGNATURE:		
\bigcap	100 7 11 0	

(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.)

Signature of a member or an authorized representative of a member.

MacDonnell RDMS
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)