# L13000/53408

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Duning Freihald Manna)
(Business Entity Name)
(Document Number)
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SECRETARY OF STATE

OCT 3 1 2013

T. HAMPTON

(850) 245-6051.

#### **COVER LETTER**

TO:

Registration Section
Division of Corporations

SUBJECT

Pet Doc Affordable Services 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:

### Brandon Randolph

Name of Person

Pet Doc Affordable Services LLC

Firm/Company

410 Westchester Drive

Address

Altamonte Springs, FL 32701

City/State and Zip Code

BMRSR@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Brandon Randolph

J**4**07

283-2929

Name of Person

Area Code & Daytime Telephone Number

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 Fee, Certificate of Status & Certified Copy

(additional copy is enclosed)

**Mailing Address** 

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street/Courier Address

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

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ADDICE E A	
ARTICLE I - Name: The name of the Limited Lightlity Company is	in
The name of the Limited Liability Company i	
Pet Doc Affordable Services LLC	
(Must end with the words "Limited Lia	ability 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:
D 1000 4.13	36 W A 11
Principal Office Address:	Mailing Address:
410 Westchester Drive	410 Westchester Drive
Altamonte Springs, FL 32701	Altamonte Springs, FL 32701
ADTICLE III Degistered Agent Degister	red Office, & Registered Agent's Signature:
(The Limited Liability Company cannot serve as its own Rep	gistered Agent. You must designate an individual or another
business entity with an active Florida registration.)	
The name and the Florida street address of the	e registered agent are:
Pronden Bendelph	
Brandon Randolph Nar	me .
410 Westchester Drive	11 (0 0 D NOT 11)
	address (P.O. Box <u>NOT</u> acceptable)
Altamonte Springs	
City,	State, and Zip
Having been named as registered agent and t	to accept service of process for the above stated limited
	in this certificate, I hereby accept the appointment as
	pacity. I further agree to comply with the provisions of
	plete performance of my duties, and I am familiar with
ana accept the obligations of my position as	registered agent as provided for in Chapter 608, F.S
-	201 TAS
	le c
Registered Agent's Sig	gnature (REQUIRED)  LLAHASSI  AHASSI
	(SS) 30 F
CONT	

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:

MGRM		Brandon Randolph
		410 Westchester Drive
		Altamonte Springs, FL 32701
-		
		-
	,	
(Use attachment	if necessary)	
TEV. Decention	data :6 a4laan 4laan 4	La data af Climan
LE V: Ellective	isted the date my	he date of filing: (OPTIONA ist be specific and cannot be more than five busines
	the date of filing.)	

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.)

> Brandon Randloph 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)