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(Re	equestor's Name)	
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SECRETARY OF STATE ALLAHASSEE FLORIDA 2014 FEB 28 AM III: 4.0

MAR - 3 2013 T. HAMPTON

COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJ	ECT: FLORIDA KEYS PET CREMAT Name of L	ION LLC imited Liability Company	
The en	nclosed Articles of Organization and fee(s)	are submitted for filing.	
Please	return all correspondence concerning this	matter to the following:	
	THOMAS J HAYES		
	INDINAS J NATES	Name of Person	
		Firm/Company	
	146 SIUOX STREET	Address	
	TAVERNIER, FL 33070	City/State and Zip Code	
Æ	YECATCHERSTJ@AOL.COM E-mail address: (to be us	· · ·	
	E-mail address: (to be us	ed for future annual report notifica	ation)
For fu	rther information concerning this matter, ple	ease call:	
THOM	MAS J HAYES at (305) 394-3485	
	Name of Person		lephone Number
Enclos	ed is a check for the following amount:		
	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 Add Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 3230	tions der Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
FLORIDA KEYS PER CREMATION LLC (Must end with the words "Lim	ited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the princip	al office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
171 HOOD AVENUE TAVERNIER, FL 33070	146 SIOUX STREET TAVERNIER, FL 33070
nother business entity with an active Florida registr The name and the Florida street address of the registe THOMAS J HAYES No. 146 SIOUX STREET	,
Florida street address (P.O.	Box NOT acceptable)
TAVERNIER	FL 33070 Zip
City	Zip
the place designated in this certificate, I hereby ac capacity. I further agree to comply with the provision of my duties, and I am familiar with and accept the	st service of process for the above stated limited liability company as except the appointment as registered agent and agree to act in this cons of all statutes relating to the proper and complete performance to obligations of my position as registered agent as provided for in hapter 605, F.S
	, TAS 731

(CONTINUED)

Page 1 of 2

MINFEB 28 AH II: 40
SECRETARY OF STATE
SECRETARY OF STATE

	THOMAS J HAYES 146 SIOUX STREET TAVERNIER, FL 33070 STEVEN TURNER 4539 NORTHBROOK DR TOLEDO. OH 43623
ttachment if necessary) Effective date, if other than the date of filing:	146 SIOUX STREET TAVERNIER, FL 33070 STEVEN TURNER 4539 NORTHBROOK DR TOLEDO, OH 43623
ttachment if necessary) Effective date, if other than the date of filing: date is listed, the date must be specific and	TAVERNIER, FL 33070 STEVEN TURNER 4539 NORTHBROOK DR TOLEDO. OH 43623
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Effective date, if other than the date of filing: late is listed, the date must be specific and L.)	(OPTIONAL)
UIRED SIGNATURE:	1 /
Signature of a member or	was J Hang
(In accordance with section 605.0203 (1 constitutes an affirmation under the pena	1) (b), Florida Statutes, the execution of this document alties of perjury that the facts stated herein are true. Ibmitted in a document to the Department of State
THOMAS J HAYES Typed o	or printed name of signee
F	Filing Fees:
.00 Filing Fee for Articles of Organization	on and Designation of Registered Agent 🗦 🔊 🗦
.00 Certified Copy (Optional)	Filing Fees: on and Designation of Registered Agent The Fees
6.00 Certificate of Status (Optional)	李帝 田
Pa	on and Designation of Registered Agent TALLAHASSEE, FLORIDI age 2 of 2