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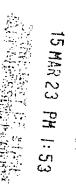
(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
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Special Instructions to	•	

Office Use Only



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COVER LETTER

TO:	Registration Division of C			
SUBJ	ECT: <u>Meals F</u>	or Dogs, LLC Name of Lin	nited Liability Company	
The er	nclosed Articles	of Organization and fee(s) a	re submitted for filing.	
Please	return all corres	spondence concerning this m	atter to the following:	
	Catherine	Paul-Hus		
			Name of Person	
	Meals Fo	r Dogs, LLC.		
			Firm/Company	
	2830 NE	8th Court		
	2000 142	our oddir.	Address	
		Desch Fledde 0000		
	Pompano	Beach. Florida, 33062 (City/State and Zip Code	
<u>.c</u>	atherine@mea	Isfordogs.com	d for future annual report notifica	4:
		·	·	mon)
For fu	rther information	n concerning this matter, ple	ase call:	
Cathe	erine Paul-Hus	at (954) 610-2216	
	Nam	e of Person	Area Code Daytime Tel	ephone Number
Enclos	sed is a check for	r 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)
		ling Address	Street/Courier Add	ress
		stration Section	Registration Section	ions
		sion of Corporations Box 6327	Division of Corporat Clifton Building	UIIS
		ahassee, FL 32314	2661 Executive Cent	er Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Meals For Dogs, LLC. (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 of	fice of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2830 NE 8th Court Pompano Beach, Florida, 33062	2830 NE 8th Court Pompano Beach, Florida, 33062
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own another business entity with an active Florida registration.) The name and the Florida street address of the registered.	Registered Agent. You must designate an individual or n.)
Catherine Paul-Hus	
Name	
2830 NE 8th Court Florida street address (P.O. Box	NOT acceptable)
Pompano Beach	FL 33062
City	Zip
the place designated in this certificate, I hereby accept capacity. I further agree to comply with the provisions of of my duties, and I am familiar with and accept the obl	rvice of process for the above stated limited liability company at the appointment as registered agent and agree to act in this of all statutes relating to the proper and complete performance igations of my position as registered agent as provided for in er 605, F.S
(CONTINUI	ED)
Page 1 of 2	

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	Catherine Paul-Hus
	2830 NE 8th Court
	Pompano Beach, Florida, 33062
MGR	Julie M. Escuage
	2700 SE 1st Court
	Pompano Beach, Florida, 33062
ective date is listed, the date must be sp	e of filing: <u>March 1, 2015</u> . (OPTIONAL) pecific and cannot be more than five business days prior to or 90
EV: Effective date, if other than the date	e of filing: <u>March 1, 2015</u> . (OPTIONAL) pecific and cannot be more than five business days prior to or 90
E V: Effective date, if other than the date ective date is listed, the date must be sport filling.) E VI: Other provisions, if any.	
E V: Effective date, if other than the date extive date is listed, the date must be suffiling.) E VI: Other provisions, if any. REQUIRED SIGNATURE:	pecific and cannot be more than five business days prior to or 90
E V: Effective date, if other than the date ective date is listed, the date must be suffiling.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a m	ember or an authorized representative of a member.
E V: Effective date, if other than the date ective date is listed, the date must be suffiling.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a m (In accordance with section 6	ember or an authorized representative of a member.
E V: Effective date, if other than the date ective date is listed, the date must be suffiling.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a m (In accordance with section 6 constitutes an affirmation und	ember or an authorized representative of a member. 05.0203 (1) (b), Florida Statutes, the execution of this document of the penalties of perjury that the facts stated herein are true.
E V: Effective date, if other than the date ective date is listed, the date must be suffiling.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a m (In accordance with section 6 constitutes an affirmation und I am aware that any false info	ember or an authorized representative of a member. 105.0203 (1) (b), Florida Statutes, the execution of this document of the penalties of perjury that the facts stated herein are true.
E V: Effective date, if other than the date ective date is listed, the date must be suffiling.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a m (In accordance with section 6 constitutes an affirmation und I am aware that any false info constitutes a third degree felo	ember or an authorized representative of a member. 205.0203 (1) (b), Florida Statutes, the execution of this document of the penalties of perjury that the facts stated herein are true. 207.0203 (1) (a) (b) Florida Statutes, the execution of this document of the penalties of perjury that the facts stated herein are true. 208.0203 (1) (b) Florida Statutes, the execution of this document of the penalties of perjury that the facts stated herein are true. 209.0203 (1) (b) Florida Statutes, the execution of this document of the penalties of perjury that the facts stated herein are true. 209.0203 (1) (2) (3) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4
E V: Effective date, if other than the date ctive date is listed, the date must be significant. E VI: Other provisions, if any. E VI: Other provisions, if any. Signature of a m (In accordance with section 6 constitutes an affirmation und I am aware that any false info	ember or an authorized representative of a member. 105.0203 (1) (b), Florida Statutes, the execution of this document of the penalties of perjury that the facts stated herein are true. 105.0203 (1) (b), Florida Statutes, the execution of this document of the penalties of perjury that the facts stated herein are true. 107.0203 (1) (b), Florida Statutes, the execution of this document of the penalties of perjury that the facts stated herein are true. 108.0203 (1) (b), Florida Statutes, the execution of this document of the penalties of perjury that the facts stated herein are true. 109.0203 (1) (b), Florida Statutes, the execution of this document of the penalties of perjury that the facts stated herein are true. 109.0203 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)