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(Re	equestor's Name)	
(Ad	ddress)	
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PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
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2015 AUG-6 AM 9: 15
SECRETARY OF STATE

AUG 11 2015

COVER LETTER

gistration Section vision of Corporations		
Name	of Limited Liabili	y Company
d Articles of Organization and fe	e(s) are submitted	for filing.
all correspondence concerning	this matter to the fo	ollowing:
Calvin Earl Simpson		
	Name of	Person
Critter Junction Farm & Pet Sup	ply, LLC	
	Firm/Cor	npany
205 E Cherokee Ave		
	Addre	SS
Bushnell, FL 33513		
ritter.Junction@vahoo.com	City/State and	Zip Code
	e used for future ar	inual report notification)
ormation concerning this matter,	, please call:	
Calvin Earl Simpson	352	793-7949
Name of Person	Area Code	Daytime Telephone Number
check for the following amount	:	
	tus Certifie	Spiling Fee & Spiling Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address	_	Street Address
		New Filing Section Division of Corporations
P.O. Box 6327	(Clifton Building 1661 Executive Center Circle
	Critter Junction Farm & Pet Su Name d Articles of Organization and fet all correspondence concerning Calvin Earl Simpson Critter Junction Farm & Pet Sup 205 E Cherokee Ave Bushnell, FL 33513 ritter.Junction@yahoo.com E-mail address: (to be cormation concerning this matter. Calvin Earl Simpson Name of Person a check for the following amounting Fee \$130.00 Filing Fet Certificate of Star Mailing Address New Filing Section Division of Corporations	Critter Junction Farm & Pet Supply, LLC Name of Limited Liability Articles of Organization and fee(s) are submitted to a all correspondence concerning this matter to the fee Calvin Earl Simpson Name of Erritter Junction Farm & Pet Supply, LLC Firm/Concepts E Cherokee Ave Addres Bushnell, FL 33513 City/State and ritter. Junction@yahoo.com E-mail address: (to be used for future art formation concerning this matter, please call: Calvin Earl Simpson Area Code Acheck for the following amount: Ing Fee \$130.00 Filing Fee & Certificate of Status Mailing Address New Filing Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32301

ARTICLES	OF ORGANIZATION FOR	R FLORIDA LIMIT	ED LIABILITY COMPANY	~
ARTICLE I - Name: The name of the Limited Liabi	lity Company is:		2015 A	MED
	rm & Pet Supply, LLC	d Liability Comp	IALLARA iny, "L.L.C.," or "LLC.")	FILED 16-6 AM 9: 18 SSEE. FLORIDA
ARTICLE II - Address: The mailing address and street			ed Liability Company is:	SEE. FLORION
<u>Princ</u>	pal Office Address:		Mailing Address:	
205 E Cherokee		2	05 E Cherokee	
Bushnell, FL 3351.	3	В	ushnell, FL 33513	
ARTICLE III - Registered A The Limited Liability Compar mother business entity with ar The name and the Florida stree	ny cannot serve as its ow a active Florida registrati	n Registered Ager on.) ed agent are:	gent's Signature: t. You must designate an individual o	r
		Name		
	205 E Cherokee Av	e		
	Florida street addre	ss (P.O. Box <u>NO</u>	acceptable)	
	Bushnell	FL	33513	
	City	State	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 605, F.S..

(CONTINUED)

Page 1 of 2

44440004 4 .1		ame and Address:
"AMBR" = Auth		
"MGR" = Manag MGR		lary Dawn Fisher
MGK		623 CR 476B
		ushnell, FL 33513
		domon, i D 55515
		
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fective date is listed of filing.)	te, if other than the date of filing: d, the date must be specific and ca	. (OPTIONAL) nnot be more than five business days prior to or 90 decicable statutory filing requirements, this date will not be
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ARTICLE IV-