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| Special Instructions to | Filing Officer: | |
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FILED

15 SEP -4 FN 3-32



COVER LETTER

| то: | Registration Section Division of Corporations |
|-----------|---|
| CUDII | Pawz Publishing, LLC |
| SUBJI | Name of Limited Liability Company |
| The en | closed Articles of Organization and fee(s) are submitted for filing. |
| Please | return all correspondence concerning this matter to the following: |
| | Rebekah Spencer |
| | Name of Person |
| | Pawz Publishing, LLC |
| | Firm/Company |
| | 44 Byron Dr. |
| | Address |
| | Avon, CT 06001 |
| | City/State and Zip Code author@rebekahphillips.com |
| | E-mail address: (to be used for future annual report notification) |
| For furth | ner information concerning this matter, please call: |
| | Rebekah Spencer at (203) 584-0702 |
| | Name of Person Area Code Daytime Telephone Number |
| Enclos | ed is a check for the following amount: |
| \$125.0 | 0 Filing Fee \$130.00 Filing Fee & Certificate of Status (additional copy is enclosed) \$160.00 Filing Fee, Certified Copy (additional copy is enclosed) |
| | Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Clifton Building Tallahassee, FL 32301 Tallahassee, FL 32301 |



September 14, 2015

REBEKAH SPENCER 44 BYRON DR AVON, CT 06001

SUBJECT: PAWZ PUBLISHING, LLC

Ref. Number: W15000060307

We have received your document for PAWZ PUBLISHING, LLC. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$125.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

WESTLEE A PAINTER Regulatory Specialist II

Letter Number: 215A00019328

SEP -4 PM 3-32

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: The name of the Limited Liability Company is: | | FILED |
|--|---------------------------------|--------------------------------|
| Pawz Publishing, LLC | | 15 SEP -4 PH 3-32 |
| (Must end with the words "Limited Liability | Company, "L.L.C.," or "LLC.") | ALEGAET ARY OF STATE LALEGABLA |
| ARTICLE II - Address: The mailing address and street address of the principal office of the | e Limited Liability Company is: | TEURIJA |
| Principal Office Address: | Mailing Addr | ess: |
| 8220 Lakewood Ranch Blvd. | 44 Byron Dr. | |
| Bradenton, FL 34202 | Avon, CT 06001 | |
| ARTICLE III - Registered Agent, Registered Office, & Registered Cithe Limited Liability Company cannot serve as its own Registered another business entity with an active Florida registration.) | | lividual or |
| The name and the Florida street address of the registered agent are | 2) | |
| Rehekah Spencer | | |

8220 Lakewood Ranch Blvd.

Florida street address (P.O. Box NOT acceptable)

Bradenton FL 34202

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..

Name

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

| | Name and Address: uthorized Member | |
|--|--|-----------|
| "MGR" = Ma | | |
| AMBR | Rebekah Spencer | |
| | 8220 Lakewood Ranch Blvd. | |
| | Bradenton, FL 34202 | |
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| (Use attachme | ent if necessary) | |
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| FICLE V: Effective in effective date is I date of filing.) te: If the date insert | e date, if other than the date of filing: 8/27/2015 . (OPTIONAL) listed, the date must be specific and cannot be more than five business days prior to or 90 deted in this block does not meet the applicable statutory filing requirements, this date will not be | - |
| TICLE V: Effective n effective date is late of filing.) e: If the date insert document's effective | e date, if other than the date of filing: 8/27/2015 . (OPTIONAL) listed, the date must be specific and cannot be more than five business days prior to or 90 dated in this block does not meet the applicable statutory filing requirements, this date will not be date on the Department of State's records. | - |
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| FICLE V: Effective on effective date is I date of filing.) te: If the date insert document's effective FICLE VI: Other present the series of t | ted ate, if other than the date of filing: 8/27/2015 (OPTIONAL) sisted, the date must be specific and cannot be more than five business days prior to or 90 deted in this block does not meet the applicable statutory filing requirements, this date will not be date on the Department of State's records. | - |
| TICLE V: Effective n effective date is I late of filing.) e: If the date insert document's effective of the process of the pro | signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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. | - |
| TICLE V: Effective n effective date is late of filing.) e: If the date insert document's effective TICLE VI: Other present the second of the the second | signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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. | _ |

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

Page 2 of 2

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