

L16000204021

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
NOV -7 PM 2:15

W16-053085

11/08/16



16 NOV -7 PM 4:22

**FLORIDA DEPARTMENT OF STATE**  
Division of Corporations

August 1, 2016

JANICE GRANADA  
7705 S.W. MARTIN HWY.  
PALM CITY, FL 34990

SUBJECT: WAG KENNELS, LLC  
Ref. Number: W16000053085

We have received your document for WAG KENNELS, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation.

One or more major words may be added to make the name distinguishable.

The document number of the name conflict is L14000153278.

The registered agent must sign accepting the designation.

Please return the corrected original and one copy of 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.

Thomas Chang  
Regulatory Specialist II  
New Filing Section

Letter Number: 816A00016032

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: WAG Kennels, 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:

Janice M Granda  
Name of Person

WAG Kennels, LLC  
Firm/Company

7705 SW Martin Highway  
Address

Palm City, FL 34990  
City/State and Zip Code

WAG Kennels@yahoo.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Janice M Granda 352, 283-0979  
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**  
New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**  
New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

WAG Kennels, 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 office of the Limited Liability Company is:

Principal Office Address:

7705 SW Martin Hwy  
Palm City, FL 34990

Mailing Address:

7705 SW Martin Hwy  
Palm City, FL 34990

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Janice M Granda  
Name

7705 SW Martin Hwy  
Florida street address (P.O. Box **NOT** acceptable)  
Palm City FL 34990  
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..

Janice M Granda  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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DIVISION OF CORPORATE REGISTRATION  
2016 NOV - 7 PM 2:15

**ARTICLE IV-**

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

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

**Name and Address:**

Aaron Wilkerson  
7705 SW Martin Hwy  
Palm City, FL 34990

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing, July 16, 2016 (OPTIONAL)  
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**ARTICLE VI:** Other provisions, if any.

**REQUIRED SIGNATURE:**

Janice McGranda

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.

Janice McGranda

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)