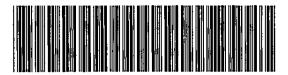
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(Re	equestor's Name)		
(Address)			
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(City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificates	s of Status	
Special Instructions to Filing Officer:			
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COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Never Bored Entertainment, 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:				
Wesley P Tomlin Name of Person				
Name of Person				
Town + Country Veterinarians Firm/Company				
Firm/Company				
6980 SW Archer Rd				
Address				
Gainesville, FL 32608 City/State and Zip Code				
City/State and Zip Code				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Wesley Tomlin at (352) 562-5620 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 (additional copy is enclosed) \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)				
Mailing Address Street Address				

New Filing Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

ARTICLE I - Name:

ARTICLE II - Address:

The name of the Limited Liability Company is:

FILED

16 DEC 12 PM 3: 19

Mailing Address:

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: Wesley Tomlin Name G980 SW Arche 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: G980 SW Arche Registered Agent's Signature: Tomlin Florida street address (P.O. Box NOT acceptable) Gainesville FL 32608 City State Zip
(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:
Wesley Tomlin Name 6980 SW Arche Rd Florida street address (P.O. Box NOT acceptable)
Florida street address (P.O. Box NOT acceptable)
Florida street address (P.O. Box NOT acceptable)
·
0', 0, 1
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 the familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S
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:

_	<u>Fitle:</u> 'AMBR" = Authorized Member	Name and Address:
Authorized"		Wesley 7 Tomlin 9221 NW 12 Pl Grainesville, Tel 32606
Authorized.		Tom J Aleman 25 25 NW 36th LD Gainesville FC 72605
tuthorized !	Member	Aaron L Riggs 2525 NL 36m OLD Gainesrille, FL 32608
-		
((Use attachment if necessary)	
(If an effe the date o <u>Note:</u> If	f filing.)	cannot be more than five business days prior to or 90 days after pplicable statutory filing requirements, this date will not be listed a
ARTICLI	E VI: Other provisions, if any.	
1	REQUIRED SIGNATURE:	Tombin
	This document is executed in acc	an authorized representative of a member. ordance with section 605.0203 (1) (b), Florida Statutes. ion submitted in a document to the Department of State

Wesley Tomlin
Typed or printed name of signee

Filing Fees:

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

constitutes a third degree felony as provided for in s.817.155, F.S.

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