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(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	
(Address) (City/State/Zip/Phone #) (City/State/Zip/Phone #) (Business Entity Name) (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	(Requestor's Name)
(City/State/Zip/Phone #)	(Address)
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04/30/18--01020--007 **130.00



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MAY 0 7 2018

TO: Registration Section Division of Corporations

SUBJECT: Alley Catt Holdings, LLC

The enclosed Articles of Organization and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

N. Richard Schopp
N RICHARD SCHOPP PA
453 NW Prima Vista Blvd.
Port St. Lucie, Florida 34983
E-mail address (to be used for future annual report notification): alle_catt50@icloud.com

For further information concerning this matter, please call:

N. Richard Schopp at (772) 878-4120

Enclosed is a check for the following amount: \$130.00 Filing Fee and Certificate of Status

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

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

ARTICLES OF ORGANIZATION OF ALLEY CATT HOLDINGS, LLC

ARTICLE I - NAME

The name of the limited liability company is Alley Catt Holdings, LLC, ("company").

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Limited Liability

Company is:

Principal Office Address: 142 Fair Oak Street Salamanca, New York 14779 Mailing Address: 142 Fair Oak Street Salamanca, New York 14779

ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

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

Winston Shelton 389 SW East Port Circle Port St. Lucie, Florida 34953 APR 30 AHII: 0

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.

ARTIGLE IV - MANAGERS OR MEMBERS

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

7.15. 1

Name and Address:

"MGR" = Manager "AMBR" = Authorized Member

MGR

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Title:

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Joseph Shelton 142 Fair Oak Strest Salamanca, New York 14729

REQUIRED SIGNATURE:

Signature of a member of an authorized ropresentative of a member

This document is executed in accordance with section 605.0203(1)(b). Florida Statutes. I am gware 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.

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Joseph Shelton Typed or printed name of signce

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