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

Office Use Only

K. PAGF NOV 27 2018



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COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: YAPPY Hour PCH SIHING LLC Name of Limited Liability Company
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:
Lucette M Lucu Name of Person
Yappy Hour Pet Sitting Firm/Company
155 Key Colony Court
DAYTONA BRACH Shores FlA. 32118 City/State and Zip Code YAPRY Hour Pet Sitting 24.70 amail. 10m E-mail address: (to be used for future annual report notitication)
For further information concerning this matter, please call:
Luceffe Lucei at (32) , 624.5316 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee S130.00 Filing Fee & Certificate of Status Certificate of Status Certificate of Status & Certificate Copy (additional copy is enclosed)
Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallabasee, FL 32314 2601 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Vapy Hour Pet Sitting. LLC (Must contain the words Limited Liabil	ity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of	of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
155 Key rolony fourt	155 Key Colony Court

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:

ARTICLE I - Name:

The name of the Limited Liability Company is:

Name

155 Key Colony Cou(t
Florida street address (P.O. Box NOT acceptable)

Daytona Boach Shores, Fl. 32118

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)

Registered Agent's Signature (REQUIRED)

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Filing Fees:

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

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)