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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:				

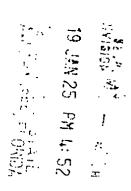
Office Use Only

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COVER LETTER

Di	vision of Corporations
SUBJECT	Cash's Bullies K9 Elite, LLC.
SOBJECT	Name of Limited Liability Company
The enclose	ed Articles of Organization and fee(s) are submitted for filing.
Please retur	n all correspondence concerning this matter to the following:
	Derrick Alonzo Cash, Jr.
	Name of Person
	Cash's Bullies K9 Elite, LLC.
	Firm/Company
	2456 Deedra Street
	Address
	Port Charlotte, Florida 33952
	City/State and Zip Code
-	mreashmiami@gmail.com E-mail address: (to be used for future annual report notification)
For further in	iformation concerning this matter, please call:
	Derrick Cash, Jr. 305 927-4300 at ()
	Name of Person Area Code Daytime Telephone Number
Enclosed is	a check for the following amount:
\$125.00 Fi	S130.00 Filing Fee & S155.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) 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

$\stackrel{!}{\mathsf{ARTICLES}} \mathsf{OF}\,\mathsf{ORGANIZATION}\,\mathsf{FOR}\,\mathsf{FLORIDA}\,\mathsf{LIMITED}\,\mathsf{LIABILITY}\,\mathsf{COMPANY}$

	Cash's Bullies K9	Elite 1.1.C	
(Must co	ntain the words "Limited		L.C.," or "LLC.")
ARTICLE II - Address:		. Other control of the break of the	in 1. 111
The mailing address and street	address of the principal c	office of the Limited L	iability Company is:
<u>Princ</u>	ipal Office Address:		Mailing Address:
2456 Deedra Stree	t	2456 [Deedra Street
Port Charlotte, Florida 33952		Port C	harlotte, Florida 33952
ARTICLE III - Registered A	gent, Registered Office,	& Registered Agent	's Signature:
ARTICLE III - Registered A The Limited Liability Compar mother business entity with a	ny cannot serve as its own	Registered Agent, Yo	
The Limited Liability Compa	ny cannot serve as its own n active Florida registratio	n Registered Agent, Yo on.)	's Signature: ou must designate an individual or
The Limited Liability Comparanother business entity with a	ny cannot serve as its own n active Florida registratio	a Registered Agent. Yo on.) d agent are:	
The Limited Liability Comparanother business entity with a	ny cannot serve as its own n active Florida registratio et address of the registered	a Registered Agent. Yo on.) d agent are:	
The Limited Liability Comparanother business entity with a	ny cannot serve as its own n active Florida registratio et address of the registered	Registered Agent, Yo on.) d agent are: sh. Jr.	
The Limited Liability Comparanother business entity with a	ny cannot serve as its own active Florida registration active Florida registration active Florida registered address of the registered Derrick Alonzo Caracteristics Alonzo Cara	Registered Agent, Yo on.) d agent are: sh. Jr.	ou must designate an individual or
The Limited Liability Comparanother business entity with a	ny cannot serve as its own active Florida registration active Florida registration active Florida registered address of the registered Derrick Alonzo Caracteristics Alonzo Cara	n Registered Agent. Yo on.) d agent are: sh, Jr. Name	ou must designate an individual o

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. Thereby 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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	Derrick Alonzo Cash. Jr.
MGR	2456 Deedra Street
	Port Charlotte, Florida 33952
	1 Ort Charrotte, 1 forful 35932
AMBR	Tina Cash
- 10/11/200	18643 SW 28th Court
	Miramar, Florida 33029
	
(Use attachment if necessary)	
If an effective date is listed, the date must he date of filing.) Note: If the date inserted in this block does he document's effective date on the Departing ARTICLE VI: Other provisions, if any.	e date of filing:
This document is e I am aware that any	a member or an authorized representative of a member. executed in accordance with section 605.0203 (1) (b), Florida Statutes. If false information submitted in a document to the Department of State
constitutes a third c	legree felony as provided for in s.817.155, F.S.
	Derrick Alonzo Cash, Jr.
	Typed or printed name of signee

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)
- S 5.00 Certificate of Status (Optional)