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Florida Department of State
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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : PYLE, DELLINGER & DUZ, PLLC
Account Number : I20000000053
Phone : (386)615-9007
Fax Number : (386)676-2615

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: lizgraffaguirre@gmail.com

FLORIDA LIMITED LIABILITY CO. In Dog We Trust, LLC

Certificate of Status	0
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**ARTICLES OF ORGANIZATION
OF
IN DOG WE TRUST, LLC**

ARTICLE I – NAME

The name of the limited liability company is In Dog We Trust, LLC, ("company").

ARTICLE II – ADDRESS

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

Principal Office Address:
112 Sweetwater Oaks Lane
Daytona Beach, Florida 32114

Mailing Address:
112 Sweetwater Oaks Lane
Daytona Beach, Florida 32114

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

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

Elizabeth Graffagnino
112 Sweetwater Oaks Lane
Daytona Beach, Florida 32114

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.

Elizabeth Graffagnino
Elizabeth Graffagnino

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ARTICLE IV - MANAGERS OR MEMBERS

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

Title:

"MGR" = Manager

"AMBR" = Authorized Member

Name and Address:

MGR

Elizabeth Graffagnino
112 Sweetwater Oaks Lane
Daytona Beach, Florida 32114

ARTICLE V - EFFECTIVE DATE

The effective date of the company shall be November 12, 2020.

REQUIRED SIGNATURE:

Elizabeth Graffagnino

Signature of 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.

Elizabeth Graffagnino

Typed or printed name of signer

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