L21000436883

	(Requestor's Name)				
	(Address)				
	(Address)				
<u> </u>	(City/State/Zip/Phone #)				
PICK-UF	P WAIT MAIL				
	(Business Entity Name)				
(Document Number)					
Certified Copies	Certificates of Status				
Special Instructions	s to Filing Officer:				





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COVER LETTER

Division of Corporations		
SUBJECT: Cactus Dog LLC. Name of Limited Liabi		
Name of Limited Liabi	lity Company	
The enclosed Articles of Organization and fee(s) are submittee	d for filing.	
Please return all correspondence concerning this matter to the	following:	
Stanley That	pede	
Name o	f Person	
Cactus Dog	LLC.	
Firm/Co	ompany	
1317 EdgeWa	ter Dr. # 2331	
Add	ress	
Orlando Fi	_ 32804	
City/State ar	2. 32804 ad Zip Code	
E-mail address: (to be used for future:	nail. Com	
	annual report notification)	
For further information concerning this matter, please call:		
Stan Thabede at (984) Name of Person Area Code	364-9360	
Name of Person Area Code	Daytime Telephone Number	
Enclosed is a check for the following amount:		
□\$125.00 Filing Fee □\$130.00 Filing Fee & □\$15 Certificate of Status Certifi	5.00 Filing Fee & ed Copy al copy is enclosed) \$\sum_{160.00}\$ Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Address	Street Address	
New Filing Section Division of Corporations	New Filing Section Division The Centre of Tallahassee	
P.O. Rox 6327	2.115 N. Monroe Street, Suita 810	

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

(Must contain	5 Dog LLinited I	Ciability Company.	"L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street add	ress of the principal of	fice of the Limited	Liability Company is:		
Principal Office Address:			Mailing Address:		
1317 Edges	3	1317 Edgewater Dr #233 Driando Fu 32304			
ARTICLE III - Registered Agent (The Limited Liability Company ca another business entity with an act The name and the Florida street add	annot serve as its own tive Florida registration dress of the registered	Registered Agent. 'n.)		dual or	
	·	Name			
	1317 Edgewater Dr				
		(P.O. Roy NOT a	(ceptable)		
	Florida street address	(1.0. Dox <u>307</u> a			
	Florida street address Orlando	FL FL	32804		
			32804 Zip		

(CONTINUED)

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ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: "AMBR" = Authorized Member "MGR" = Manager AMBR C.3 (Use attachment if necessary) . (OPTIONAL) ARTICLE V: Effective date, if other than the date of filing: _ (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. ARTICLE VI: Other provisions, if any. REQUIRED SIGNATURE:

ECOTRED SIGNATORE.

Signature of a member or 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.

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)
- \$ 5.00 Certificate of Status (Optional)