## 3000174040

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special legacystics to Filips Office.
Special Instructions to Filing Officer:

Office Use Only



400405438744

S. CHATHAM APR 1 2 2023

2023 APR 11 PM 1: 30

2023 APR 11 PM 2: 10

ALL WHY SPEET

RECEIVED

## FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

04/11/23

NAME: BIG FAT DOGS LLC

TYPE OF FILING: ARTICLES

COST:

125.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

			CO	VER LETT	TER		
	w Filing Sec vision of Cor						
SUBJECT:	Big Fat Do	gs LLC					
		Nan	ne of Lin	nited Liabil	ity Company		
The enclose	ed Articles of	Organization and	fee(s) ar	e submitted	for filing.		
Please retur	n all correspo	ondence concerning	g this ma	itter to the f	ollowing:		
	Joseph A. Y	olofsky, Esq.					
		·		Name of	Person		
	Yolofsky La	w, P.A.					
		·		Firm/Co	mpany		
	100 SE 3rd A	Ave., Suite 1000					
				Addr	ess		
	Fort Laudere	lale, Florida 33394	<b>}</b>				
			С	ity/State an	d Zip Code		
- <del>2</del>	ijy@yolofsky		<b>.</b>	f 6		i)	
					nnual report notificat	ion)	
For further in	formation co	neerning this matte	r, please	e call:			
	Joseph Yolof	sky	95 at (	54	237-4011		
-	Nam	e of Person		rea Code	Daytime Telephon	e Number	
Enclosed is	a check for th	ne following amou	nt:				
≣\$125,00		□\$130.00 Filing Certificate of St	g Fee &	Certifi	5.00 Filing Fee & ed Copy al copy is enclosed)	Certificate Certified C	Filing Fee. of Status & opy opy is enclosed)

Mailing Address

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

<u>Street Address</u> New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICI	LES OF ORGANIZATION FOR	FLORIDA LIMITED	LIABILITY COMPANY	
ARTICLE 1 - Name: The name of the Limited I	Liability Company is:			
•				
Big Fat Dogs I	LLC st contain the words "Limited I	C. L. D. W	of the manufacture	
(iviu:	st contain the words. Limited i	ыавину Сотрапу.	L.L.C., OF LLC.	
ARTICLE II - Address: The mailing address and s	treet address of the principal o	ffice of the Limited	Liability Company is:	
<u>P</u>	rincipal Office Address:		Mailing Addr	ress:
318 Windrush		Sam	e	
Indian Rocks I	Blvd Beach FL 33785 ed Agent, Registered Office,			
ARTICLE III - Registers (The Limited Liability Column) another business entity with	ed Agent, Registered Office, mpany cannot serve as its own th an active Florida registrationstreet address of the registered	& Registered Agent. \ Registered Agent. \ n.)	it's Signature:	
ARTICLE III - Registers (The Limited Liability Column another business entity with	ed Agent, Registered Office, mpany cannot serve as its own th an active Florida registratio	& Registered Agent. \ Registered Agent. \ n.)	it's Signature:	dividual or STONEY 1
ARTICLE III - Registers (The Limited Liability Column another business entity wi	ed Agent, Registered Office, mpany cannot serve as its own th an active Florida registrationstreet address of the registered	& Registered Agent. Vn.) agent are:	it's Signature:	2023 APR   I
ARTICLE III - Registers (The Limited Liability Coanother business entity wi	ed Agent, Registered Office, mpany cannot serve as its own th an active Florida registratio street address of the registered Yolofsky Law, P.A.	& Registered Agent. Vn.) agent are: Name	nt's Signature: You must designate an in	2023 APR   I
ARTICLE III - Registers (The Limited Liability Column another business entity wi	ed Agent, Registered Office, mpany cannot serve as its own th an active Florida registratio street address of the registered Yolofsky Law, P.A.  100 SE 3rd Ave, Suit	& Registered Agent. Vn.) agent are: Name	nt's Signature: You must designate an in	

am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Docustioned by:

1. J. Udofsky

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

		Name and Address:
"MGR" = M	Authorized Member	
	inager	
MGR_		Dan Baltes 318 Windrush Blvd,
		Indian Rocks Beach FL 33785
		metall Rocks Deach LE 23703
		<u></u>
		<u></u>
		' <del>-</del>
<del></del>	<del></del>	
		. 7.3
	·	<del></del> C
	ent if necessary)	to date of filing: (OPTIONAL)
LE V: Effective date is of filing.) If the date insertment's effection	re date, if other than th listed, the date must rted in this block does	ne date of filing:
LE V: Effective date is of filing.) If the date insertment's effection	re date, if other than the listed, the date must red in this block does be date on the Depart	be specific and cannot be more than five business days prior to or 90 days not meet the applicable statutory filing requirements, this date will not be
LE V: Effective date is of filing.) of the date insernment's effection.  LE VI: Other p	re date, if other than the listed, the date must red in this block does be date on the Depart	be specific and cannot be more than five business days prior to or 90 days not meet the applicable statutory filing requirements, this date will not be
LE V: Effective date is of filing.) of the date insernment's effection.  LE VI: Other p	re date, if other than the listed, the date must reed in this block does we date on the Depart rovisions, if any.  SIGNATURE:	s not meet the applicable statutory fiting requirements, this date will not be timent of State's records.  Docusigned by:  L. J. Udofsky  screened based and the statutory fiting requirements, this date will not be timent of State's records.
LE V: Effective date is of filing.) of the date insernment's effection.  LE VI: Other p	re date, if other than the listed, the date must reed in this block does we date on the Depart rovisions, if any.  SIGNATURE:  Signature of This document is deciment is deciment.	be specific and cannot be more than five business days prior to or 90 days not meet the applicable statutory fiting requirements, this date will not be timent of State's records.  Docusigned by:  L. J. Udofky  screened an authorized representative of a member. executed in accordance with section 605.0203 (1) (b), Florida Statutes.
LE V: Effective date is of filing.) of the date insernment's effection.  LE VI: Other p	re date, if other than the listed, the date must reted in this block does we date on the Depart rovisions, if any.  SIGNATURE:  Signature of This document is a I am aware that an	s not meet the applicable statutory fiting requirements, this date will not be timent of State's records.  Docusigned by:  L. J. Udofsky  screened based and the statutory fiting requirements, this date will not be timent of State's records.

Filing Fees:
\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of States (Co. 1)

\$ 5.00 Certificate of Status (Optional)