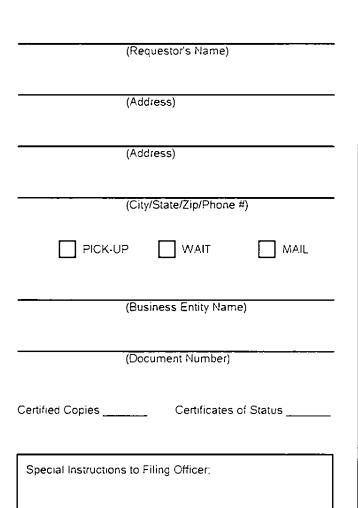
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W24000141631 12/10/2024

Office Use Only



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2024 DEC 10 PH 7: 42



Division of Corporations

JEM S. MCBRIDE 3425 LILY ORCHARD WAY APEX, NC 27539 US

SUBJECT: THE PET SERVICE, LLC Ref. Number: W24000141631

We have received your document for THE PET SERVICE, LLC and check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name of the entity must be identical throughout the document.

The name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." The abbreviations "Ltd." and "Co.", also are no longer acceptable. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Monique K Anderson Regulatory Specialist II

Letter Number: 224A00022859

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www.sunbiz.org

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

The Articles of Conversion <u>and attached Articles of Organization</u> are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida Statutes.

	(Enter Name of Other Business Entity)
2. The "Other Busine	Limited Liability Limited Partnershp
(Enter entit	y type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, forme	ed or incorporated under the laws of
October 12, 2022 On	
(date of organization,	formation or incorporation)
3. The name of the F	lorida Limited Liability Company as set forth in the attached Articles of Organization:
	(Enter Name of Florida Limited Liability Company)
4. If not effective on	the date of filing, enter the effective date:
(The effective date: One date this docume Note: If the date inserted	Cannot be prior to date of receipt or filed date nor more than 90 calendar days after ent is filed by the Florida Department of State.) in this block does not meet the applicable statutory filing requirements, this date will not be listed as the on the Department of State's records.
(The effective date: On the date this document Mote: If the date inserted document's effective date	Cannot be prior to date of receipt or filed date nor more than 90 calendar days after ent is filed by the Florida Department of State.) in this block does not meet the applicable statutory filing requirements, this date will not be listed as the

Signed this 6th day of December	_ 2024
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Printed Name: Jem S. McBnde	Name:
Signature(s) on behalf of Other Business Entity:	Title: Title: Managing Partner Title: Titl
Signature: Reinted Name: Jem S. McBride	Titl Managing Partner
MA A AK B. 1	1 Hite. Managing Faranci
Printed Name: Charles McBride	Title: Partner
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	_ Title:
If Directors or Officers have not been selected, an Inc	corporator must sign.
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
Fees:	

2024 DEC 10 PH 7: 4:2

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Na	ma.		
	imited Liability Company	vis:	
	, ,		
The Pet Service, LLC			
	ust contain the words "Limited Lia	ibility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Ac		e principal office of the Limi	tod Linkility Company lee
The maining address	ss and street address of th	e principal office of the Ellin	ted Clabinty Company is.
Principal Office &	<u>Address:</u>	Mailing Address:	
17054 Alico Commerc	ce Ct	3425 Lily Orchard Way	
Unit 12		Apex, NC 27539	
Fort Myers, FL 33967			
(The Limited Liability C business entity with an		ered Office, & Registered A egistered Agent. You must designate a the registered agent are:	
	N.	ame	
	7901 4th St N STE 300		
	Florida street address (1	P.O. Box NOT acceptable)	
	St. Petersburg	FL ³³⁷⁰²	
	City	Zip	
liability comp registered agent statutes relatin	oany at the place designate and agree to act in this cap to the proper and completingations of my position as	nd to accept service of process d in this certificate. I hereby a pacity. I further agree to com ete performance of my duties, registered agent as provided	iccept the appointment as iply with the provisions of all and I am familiar with and
	Registered Agent's S	Signature (REQUIRED)	

(CONTINUED)

ARTICLE IV-

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

er Man	<u>Title:</u> "AMBR" = Authorized Member	Name and Address:		
	"MGR" = Manager MGR	Jem S. McBride		
		3425 Lily Orchard Way		-
		Apex, NC 27539		-
				-
				-
				_
				_
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	(Use attachment if necessary)			
				20
			•	2
ARTICLE V: Other provisions, if any.			•	2024 DEC
				
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			_:3	= E
	<u>REQUIRED</u> SIGNATURE:		•	7: 43
			،شر	-

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.

Jem S. McBride

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)