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(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
(City/State/Zip/Filline #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
Special Instructions to Filing Officer: W1-3377				
Ι Ψ'				
A. LUNT				
EED 0 2010				



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01/20/10--01015--023 **160.00

SECRETARY OF STATE TALLAHASSEE; FLORINA

110 FEB -5 PH 3: 55



January 22, 2010

ROBYN HARRIS 205 BARTONS WAY W SANTA ROSA BEACH, FL 32459

SUBJECT: BAD DOG DESIGN STUDIO, LLC

Ref. Number: W10000003377

We have received your document for BAD DOG DESIGN STUDIO, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

The registered agent must sign accepting the designation.

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) 245-6094.

Agnes Lunt Regulatory Specialist II

Letter Number: 910A00001839

COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJI	ECT:	Bad Dog Design Studio, LLC Name of Limited Liability Company		
		Limited Liability Company for Authorization to Transact Business in Floregister the above referenced foreign limited liability company to transact		
Please	return all correspondence conce	erning this matter to the following:		
		Robyn Harris		
		Name of Person		
		Bad Dog Design Studio, LLC		
		Firm/Company	2010 FEB	
		205 Bartons Way W	S P	
	 -	Address	 68	FILED
		(X)-	5-25	-
		Santa Rosa Beach, FL 32459	? 	m
		City/State and Zip Code		
		C)rn	55	
	F-me	bdds2009@gmail.com ail address: (to be used for future annual report notification)		
For fur	ther information concerning this	·		
	Robyn H	······································	·	
	Name of Per	rson Area Code & Daytime Telephone Number		
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		
Enclos	sed is a check for the follow	wing amount:		
		S130.00 Filing Fee & \$\sum \\$155.00 Filing Fee & \$\sum \\$160.00 Filing F \\ Certificate of Status Certified Copy of Status & Certified Copy		

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1.	Bad Dog Design Studio, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	-
	(Name of Poteign Entitled Elability Company, must include Entitled Elability Company, E.E.C., of EEC.)	
co	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the nsent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liabi ompany," "L.L.C," "LLC.")	
2.	Arizona 3 26-3728214	
	Arizona 3. 26-3728214 (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)	-
4.	11-17-2008 _{5.}	
	11-17-2008 5. (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	
6.	ARE EB	T
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7.	205 Bartons Way W	
	205 Bartons Way W Santa Rosa Beach, FL 32459 EFOR PRINCIPAL SERVICE STATE OF STATE	
	Santa Rosa Beach, FL 32459 (Street Address of Principal Office)	-
8.	If limited liability company is a manager-managed company, check here	
Q	The name and usual business addresses of the managing members or managers are as follows:	
•	The name and asaar business addresses of the managing members of managers are as follows.	
	Robyn R. Harris, 205 Bartons Way W, Santa Rosa Beach, FL 32459	_
		-
		_
	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of rec	ords ir
	e jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a inslation of the certificate under oath of the translator must be submitted.)	
11	. Nature of business or purposes to be conducted or promoted in Florida: Screen Printing	
		•
	Signature of a member or an authorized representative of a member.	
	(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)	
	Robyn R. Harris	
	Typed or printed name of signee	

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:				
Bad Dog Design Studio, LLC		_		
If unavailable, the alternate to be used in the state of Florida is:				
2. The name and the Florida street address of the registered agent and office are:	2010 FEB SECRETA TALLAHAS			
Robyn Harris	FEB AHA	77		
(Name) $\mathcal{S}_{\mathcal{S}_{\mathcal{R}}}^{\mathcal{L}}$				
205 Bartons Way W	5 PH	m		
Florida Street Address (P.O. Box NOT ACCEPTABLE)	3: 55 PRIDA	D		
Santa Rosa Beagh, FL 32459				
City/State/Zip				
Having been named as registered agent and to accept service of process for the above liability company at the place designated in this certificate, I hereby accept the appoint				

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 608, Florida Statutes.

(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)



STATE OF ARIZONA



Office of the CORPORATION COMMISSION CERTIFICATE OF GOOD STANDING

To all to whom these presents shall come, greeting:

I, Ernest G. Johnson, Executive Director of the Arizona Corporation Commission, do hereby certify that

BAD DOG DESIGN STUDIO, L.L.C.

a domestic limited liability company organized under the laws of the State of Arizona, did organize on the 3rd day of November 2008.

I further certify that according to the records of the Arizona Corporation Commission, as of the date set forth hereunder, the said limited liability company is not administratively dissolved for failure to comply with the provisions of A.R.S. section 29-601 et seq., the Arizona Limited Liability Company Act; and that the said limited liability company has not filed Articles of Termination as of the date of this certificate.

This certificate relates only to the legal existence of the above named entity as of the date issued. This certificate is not to be construed as an endorsement, recommendation, or notice of approval of the entity's condition or business activities and practices.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the official seal of the Arizona Corporation Commission. Done at Phoenix, the Capital, this 7th Day of January, 2010, A. D.

Executive Director

By: 425879





