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D. SCOTT

COVER LETTER

COVER LETTER
TO: Registration Section Division of Corporations
SUBJECT: The Life of Riley Ret Care Sorvices, LL Name of Limited Lability Company
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.
Please return all correspondence concerning this matter to the following:
Wendy Tay lor Name of Person The Life of Riley Pet Care Services, LIC Firm/Complny 14023 Gypess Blen Drive Address Louisville Fentucky 40245 City/State and Zip Code w tay or a tloriley. com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 Enclosed is reheck for the following amount: Area Code Daytime Telephone Number STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
\$125.00 Filing Fee \$\Boxed{\textsquare}\$130.00 Filing Fee & \$\Boxed{\textsquare}\$\$ Certificate of Status \$\Boxed{\textsquare}\$\$ Certified Copy of Status & Certified Copy

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

COMPANT IO IKANSACI BUSINENS II	VITHE SPATE OF FLORIDA	OMING IS SUBMITTED TO REGIST!	ER A FOREIGN LIMITED LIABILITY
1. The Life 8	of Kiley Pet a	ve Services,	LLC
The LIA of	Chlisty company, must include "Limited I.	whility Company, "ILL C." or "LLL" of	FL LLC
2 Commonweat	that Kentucky	3. 81-380	ihy Company, ""LLL" or "LLC") 17883
+. n/A	0 // //		
Server Address of Principal (III)	first transacted business in Florida, if prior to regioetisms 505 0904 & 603 0905, F.S. to determine y	6. 14023 Cypy	ess 660 Drive
Louisville	Centucky 10245	Louisville,	Kentucky 402450
7. Name and <u>street address</u> of Flor	rida registered agent: (P.O. Box)	GOT acceptable)	
Name: Ke	Illi Dixon		
Office Address:	24 Shore Drie	re S, #118	
<u> 500</u>	uth lasadem	, Florida <u>33.7</u> (<u>27</u>
Registered agent's acceptance: Having been named as registered designated in this application, I had to comply with the provisions of a and accept the obligations of my [ereby accept the appointment as r ill statutes relative to the proper a	registered agent and agree to act	in this capacity. I further agree
<i></i> ₽	(Rejustered agrent's sup	T T T T T T T T T T T T T T T T T T T	
8. The name, title or canacity and	address of the person(s) who has/		2016
o. the harro, the or oupeatty and	andicas of the berson(s) who has		
Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
Title or Capacity: Owner	Name and Address: Wendy Taylor 140.33 Office Soften Die	Title or Capacity:	Name and Address:
Title or Capacity:	Name and Address: Wenden Taylor 14023 Christian Roll Louisian Le Por Kelli Dixora	Title or Capacity:	Name and Address:
Pitle or Capacity: Owner Regl. Manage	Name and Address: Wender Taylor 14033 Garson Dr. 14034 Ga	Title or Capacity:	Name and Address:
Regl. Manage. (Use attachments if necessary)	Wendy Taylor 14033 Agreson Police Lewis Alle Kall Kelli Dixon 1424 Spore Drive South Foredone	5245 51 33707	
Title or Capacity: Owner Regl. Manage (Use attachments if necessary) 9. Attached is a certificate of exist	Wendy Taylor 140 33 Odgesoffen Di 140 34 Odgesoffen	33707	aving custody of records in the
Title or Capacity: Owner Regl. Manage (Use attachments if necessary) 9. Attached is a certificate of exist jurisdiction under the law of which of the translator must be submitted. 10. This document is executed in a	Wendy Taylor 140 33 Office of the Control of the Co	ally authenticated by the official has in a foreign language, a translated by the official has in a foreign language.	aving custody of records in the ion of the certificate under oath
Title or Capacity: Owner Regl. Manage (Use attachments if necessary) 9. Attached is a certificate of exist jurisdiction under the law of which of the translator must be submitted. 10. This document is executed in a	Wendy Taylor 140 33 Oddes of the Levis Alle Eq. 1 Kelli Dixor South for adent ence, no more than 90 days old, du it is organized. (If the certificate 1)	ally authenticated by the official has in a foreign language, a translated by the official has in a foreign language.	aving custody of records in the ion of the certificate under oath
Title or Capacity: Owner Regl. Manage (Use attachments if necessary) 9. Attached is a certificate of exist jurisdiction under the law of which of the translator must be submitted. 10. This document is executed in a	Wendy Taylor 140 33 Office of the Control of the Co	ally authenticated by the official has in a foreign language, a translated by the official has in a foreign language.	aving custody of records in the ion of the certificate under oath

Commonwealth of Kentucky Alison Lundergan Grimes, Secretary of State

Alison Lundergan Grimes Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

Certificate of Existence

Authentication number: 198068

Visit https://app.sos.ky.gov/ftshow/certvalidate.aspx to authenticate this certificate.

I, Alison Lundergan Grimes, Secretary of State of the Commonwealth of Kentucky, do hereby certify that according to the records in the Office of the Secretary of State,

THE LIFE OF RILEY PET CARE SERVICES, LLC

is a limited liability company duly organized and existing under KRS Chapter 14A and KRS Chapter 275, whose date of organization is September 2, 2016 and whose period of duration is perpetual.

I further certify that all fees and penalties owed to the Secretary of State have been paid; that articles of dissolution have not been filed; and that the most recent annual report required by KRS 14A.6-010 has been delivered to the Secretary of State.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my Official Seal at Frankfort, Kentucky, this 15th day of January, 2018, in the 226th year of the Commonwealth.



Alison Lundergan Grimes

Secretary of State

Commonwealth of Kentucky

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