# 1418000001054

| (Requestor's Name)                      |                    |             |  |  |  |  |
|---|--------------------|-------------|--|--|--|--|
| (Address)                               |                    |             |  |  |  |  |
| (Address)                               |                    |             |  |  |  |  |
| (City/State/Zip/Phone #)                |                    |             |  |  |  |  |
| PICK-UP                                 | ☐ WAIT             | MAIL        |  |  |  |  |
| (Bt                                     | usiness Entity Nan | ne)         |  |  |  |  |
|   |                    |             |  |  |  |  |
| (Do                                     | ocument Number)    | •           |  |  |  |  |
| Certified Copies                        | _ Certificates     | s of Status |  |  |  |  |
| Special Instructions to Filing Officer: |                    |             |  |  |  |  |
|   |                    |             |  |  |  |  |
|   |                    |             |  |  |  |  |
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## COVER LETTER

| TO;  | Registration Se<br>Division of Cor |  |   |  |   |
|--|------------------------------------|--|---|--|---|
| SUBJE  | PB Franchis                        | se LLC   |   |  |   |
| 3,01,01  |                                    | Name o   | of Limited Liability  | Company  | <u> </u>  |
|  |                                    |  |   |  | t Business in Florida," Certificate of<br>npany to transact business in Florida |
| Please   | return all correspo                | ndence concerning this matter to the   | ne following:   |  |   |
|  | Dan O'                             | Loughlin   |   |  |   |
|  |                                    |  | Name of Person  |  |   |
|  | Pet Bar                            | Inc  |   |  |   |
| Firm/Company   |                                    |  |   |  |   |
|  | 3406 A                             | sbury St   |   |  |   |
|  | Address                            |  |   |  |   |
|  | Dallas,                            | TX 75205   |   |  |   |
|  |                                    | City   | /State and Zip Code   |  |   |
|  | petbarfra                          | nchise@gmail.com   |   | l  |   |
|  |                                    | E-mail address: (to be us  | sed for future annual   | report notificat                               | ion)  |
| For fur  | ther information co                | oncerning this matter, please call:  |   |  |   |
| Dan O'Loughlin 214   |                                    | 214<br>at (  | 6805136   |  |   |
|  |                                    | Name of Contact Person   | Area Code   | Daytime  | Telephone Number  |
| MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 |                                    |  | STREET AD<br>Division of Co<br>Registration S<br>Clifton Buildin<br>2661 Executiv<br>Tallahassee, F | orporations<br>ection<br>ng<br>e Center Circle |   |
| Enclose  | ed is a check for th               | e following amount: g Fee  \$\Begin{align*} \begin{align*} \begin{align*} \text{S130.00 Filing Fee & Certificate of Status} \end{align*} | S155.00 Filin<br>Certified Copy   | <i>T</i>                                       | \$160.00 Filing Fee, Certificate<br>Status & Certified Copy                     |

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| PB Franchise LLC  |  |  |   |
|---|--|--|---|
|   | Limited Liability Company; must include "Limite  | d Liability Company, "L.L.C.," or "LLC."   | )   |
|   |  |  |   |
|   | ame adopted for the purpose of transacting business in Flor  | rida. The alternate name must include "Limited Lia   | bility Company," "L.L.C," or "LLC.")          |
| 2. Texas  |  | 3. 802804709   |   |
| (Jurisdiction under the law of w                        | hich foreign limited liability company is organized)   | (FE) numi  | ber, if upplicable)                           |
| 4. 2/1/2018   |  |  |   |
|   | (Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determi | registration.)<br>ine penalty liability)   |   |
| 5 Dan O'Loughlin  |  | 6.   |   |
| (Street Address of F                                    | rincipal Office)   | (Mailing Add   | ress)   |
| 3406 Asbury ST  |  |  |   |
| Dallas, TX 75205  |  |  |   |
| 7. Name and <u>street addres</u> Name:                  | ss of Florida registered agent: (P.O. Box<br>Linda O'Loughlin  | NOT acceptable)  |   |
| Office Address:   | 150 N US Hwy 1 Suite 19  |  |   |
|   | Tequesta   | . Florida <u>33469</u>   |   |
| Registered agent's accep                                | (City)   | (Zip cod   | de)   |
| and accept the obligation.                              | s of my position as registered agent.  Linda Chol (Registered agent's)                                     | ignature)  | 18 JAN 3                                      |
| 8. The name, title or capa                              | acity and address of the person(s) who ha  | is/have authority to manage is/are:  | 3S €  |
| Title or Capacity:                                      | Name and Address:  | Title or Capacity:   | Name and Address:                             |
| President   | Dan O'Loughlin   | Vice President   | Ashley O'Loughlin                             |
|   | 3406 Asbury St<br>Dallas, TX 75205   |  | 3406-Asbury-St                                |
|   | Dalids. 17. (3203  | -  | Dalfas: TX <b>75</b> 205                      |
|   |  | _  |   |
| (Use attachments if neces                               | sary)  | -  |   |
| 9 Attached is a certificate                             | of existence, no more than 90 days old,  | duly authenticated by the official be  | wing cuctody of records in the                |
|   | of which it is organized. (If the certificate  |  |   |
| 10. This document is exec<br>submitted in a document to | uted in accordance with section 605.0203 of the Department of State constitutes a thi                      | 3 (1)(b), Florida Statutes. I am awai<br>ird degree felony as provided for in<br>of an authorized person | re that any false information s.817.155, F.S. |
|   | D 07 11  |  |   |
|   | Dan O'Loughlin   | oranted name of signee   |   |

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697

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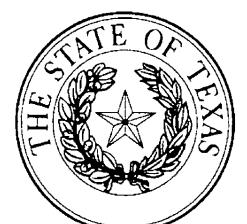
# Office of the Secretary of State

### Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for PB Franchise LLC (file number 802804709), a Domestic Limited Liability Company (LLC), was filed in this office on August 31, 2017.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed mename officially and caused to be impressed hereon the seal of State at my office in Austin, Texas on January 25, 2018.





Rolando B. Pablos Secretary of State

Phone: (512) 463-5555

Fax: (512) 463-5709