M1900000064

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

Office Use Only



600330347496

06/26/19--01013--002 **125.00



BRUCE

COVER LETTER

TO:	Registration Section Division of Corporations						
SUBJE	CCT.	Salty Paws,	LLC				
SUBJE		Name of Limited Liability Company					
				ation to Transact Business in Floric ted liability company to transact bu			
Please	return all correspondence concer	ning this matter to the foll-	owing:				
		Bernade	tte DeBrango				
	 	Name	of Person				
		Firm/0	Company				
		416 Southwes	t 8th Avenue				
		Ad	idress	·	_		
		Amarillo	Texas 79101	ı			
		City/State	and Zip Code	 -	_		
bernie@sirspeedyamarillo.com							
	E-m	ail address: (to be used for	future annual	report notification)	_		
For furt	ther information concerning this	matter, please call:					
	Bernadette De		806	680-4272			
	Name of Con	-	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	2019 JUN 26		
	Enclosed is a check for the foll Please make check payable to: \$\Begin{align*} \begin{align*} \	owing amount: FLORIDA DEPARTME \$130.00 Filing Fee & Certificate of Status	\$155.00	Filing Fee & S160.00 Filin	ng:Fee, Certifica Certified Copy	ate	

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: Salty Paws, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LI.C.") Salty Paws of Florida, LLC (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L. L. C." or "LLC.") State of Texas 83-4091730 (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) June 1, 2019 (Date first transacted business in Florida, if prior to registration) (See sections 605 0904 & 605 0905; F.S. to determine penalty liability) 416 Southwest 8th Avenue (Street Address of Principal Office) Amarillo, Texas 79101 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Jonnie M. jennings Name: 4 Eleventh Avenue, Suite 1 Office Address: Shalimar , Florida

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

(City)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity:	Name and Address:	Title or Capacity:		Name and Address:
Manager	Name: Bernadette DeBrando	Manager	Name:	
Member	Address: 416 Southwest 8th Avenue	Member	Address:	
Authorized	Amarillo, Texas 79101	Authorized		
Person		Person		
Other	Other	Other		Other
Manager	Name:	☐ Manager	Name:	
Member	Address:	Member	Address:	
Authorized		☐ Authorized		
Person		Person		
Other	Other	Other		Other
Manager	Name:	Manager	Name:	2819 II
Member	Address:	Member	Address:	<u> </u>
Authorized		Authorized		N N
Person		Person		
Other	Other	Other		Other 9 T

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

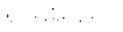
9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. 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.

Signature of an authorized person

Sonnie M. Jennings

Typed or printed name of sinkee



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



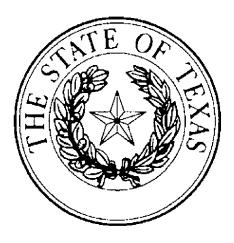
Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Salty Paws LLC (file number 803178079), a Domestic Limited Liability Company (LLC), was filed in this office on December 04, 2018.

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

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on May 24, 2019.



David Whitley Secretary of State

| Come visit us on the internet at http://www.sos.state.tx.us/ | Phone: (512) 463-5555 | Fax: (512) 463-5709 | Dial: 7-1-1 for Relay Services | Prepared by: SOS-WEB | TID: 10264 | Document: 892247880002