

NA190000008899

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

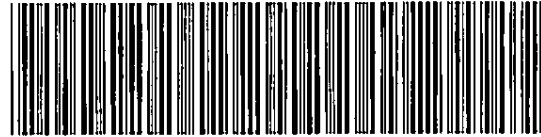
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

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Y SCOTT

SEP 16 2019

✓



COGENCYGLOBAL

115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
866.625.0838
COGENCYGLOBAL.COM

Date: **September 13, 2019**

Account#: I20000000088

Name: **KEN HOWELL**

Reference #: **1129432**

Entity Name: **DESTINATION PET, LLC**

☒ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☐ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

☐ Dissolution/Withdrawal

☐ Fictitious Name

☐ Other

ISSUES? CALL

KEN:

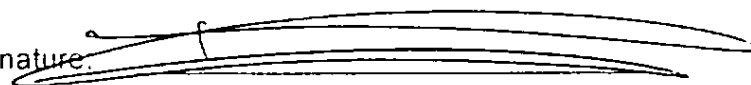
518-213-0738

19 SEP 13 PM 4:24

2019 SEP 13 PM 4:47

TALLAHASSEE, FLORIDA

Authorized Amount: **\$125.00**

Signature: 



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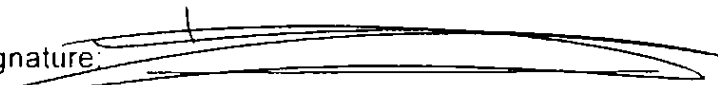
518-213-0738

TALLAHASSEE, FLORIDA

2019 SEP 13 PM 4:47

1511000

Authorized Amount: **\$125.00**

Signature: 

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:

1. Destination Pet, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "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.")

2. Delaware 3. _____
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 8822 S Ridgeline Blvd 6. 8822 S Ridgeline Blvd
(Street Address of Principal Office) (Mailing Address)
Suite 260 Suite 260
Highlands Ranch, CO 80129 Highlands Ranch, CO 80129

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: COGENCY GLOBAL INC.

Office Address: 115 North Calhoun St. Suite 4

Tallahassee, Florida 32301
(City) (Zip code)

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.

Sam Jones
(Registered agent's signature)

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:**
☐ Manager Name: Shane Kelly
☐ Member Address: 8822 S Ridgeline Blvd
☒ Authorized Suite 260
Person Highlands Ranch, CO 80129
☐ Other _____ ☐ Other _____

☐ Manager Name: Brett Erecia
☐ Member Address: 8822 S Ridgeline Blvd
☒ Authorized Suite 260
Person Highlands Ranch, CO 80129
☐ Other _____ ☐ Other _____

☐ Manager Name: Amy Jarman
☐ Member Address: 8222 S Ridgeline Blvd
☒ Authorized Suite 260
Person Highlands Ranch, CO 80129
☐ Other _____ ☐ Other _____

Title or Capacity: **Name and Address:**
☐ Manager Name: Michael Williams
☐ Member Address: 8822 S Ridgeline Blvd
☒ Authorized Suite 260
Person Highlands Ranch, CO 80129
☐ Other _____ ☐ Other _____

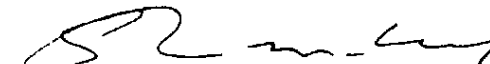
☐ Manager Name: Elizabeth Donahue
☐ Member Address: 8822 S Ridgeline Blvd
☒ Authorized Suite 260
Person Highlands Ranch, CO 80129
☐ Other _____ ☐ Other _____

☐ Manager Name: _____
☐ Member Address: _____
☐ Authorized _____
Person _____
☐ Other _____ ☐ Other _____

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
SHANE M. KELLY

Typed or printed name of signer

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "DESTINATION PET, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIFTEENTH DAY OF JULY, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DESTINATION PET, LLC" WAS FORMED ON THE TWELFTH DAY OF MAY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

2019 SEP 13 PM 4:47
WILLIAMSBURG, FLORIDA



6409416 8300

SR# 20195976727

You may verify this certificate online at corp.delaware.gov/authver.shtml


Jeffrey W. Bullock, Secretary of State

Authentication: 203218351

Date: 07-15-19