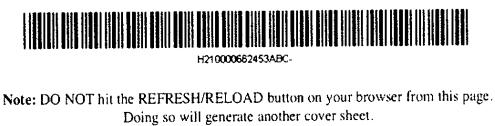
Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000066245 3)))



To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

Foreign Limited Liability Company PetSmart LLC

Certificate of Status	1
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⊙ 02/17/2021 9:20 AM

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

IN COMPLIANCE WITH SECTION 605.0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY

→ 18506176383

COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: PetSmart LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "L.L.C.") (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.") Delaware (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) (This first transacted business in Flonds, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability) 19601 N. 27th Avenue 19601 N. 27th Avenue 6. (Mailing Address) (Street Address of Principal Office) Phoenix, AZ 85027 Phoenix, AZ 85027 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporate Creations Network Inc. Name:

Registered agent's acceptance:

Office Address:

801 US Highway I

North Palm Beach

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.

> Jenisa Irizarry, Special Secretary (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]: Name and Address: Title or Capacity: Name and Address: Title or Capacity: Name: Lacey J. Bundy Alan M. Schnaid Manager Manager Address: 19601 N. 27th Avenue 19601 N. 27th Avenue Address: Member Member Phoenix, AZ 85027 Phoenix, AZ 85027 Authorized Authorized Person Person Other_____ Other____ Other Other_ Manager Manager Address: Address: Member ■ Member Authorized Authorized Person Person Other____ Other____ Other_ Other Manager | Manager Address: _____ Address: ______ ☐ Member ☐ Member ☐ Authorized ___Authorized Person Person Other____ Other____ Other____ Other__ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed 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.

O_{a}		
- PA	Signature of an authorized person	
Jenisa Irizarry		
	Typed or printed name of vignee	

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "PETSMART 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 FEBRUARY, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PETSMART LLC" WAS FORMED ON THE ELEVENTH DAY OF AUGUST, A.D. 1986.

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

Authentication: 202513479

Date: 02-15-21