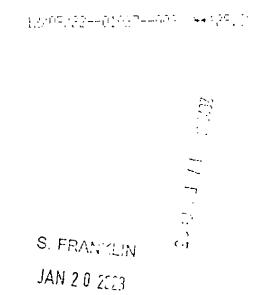
# M2300000747

(Re	equestor's Name)	
(Address)		
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	<del></del>
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	.A.
	Jan	SHOW N

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#### COVER LETTER

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ro:	Registration Section Division of Corporations		
:UBJ	US PET FOOD, LLC, ECT:		
		ne of Limited Liability Company	-
		v Company for Authorization to Transact Business in Florida, e referenced foreign limited liability company to transact business.	
lease	return all correspondence concerning this matter	to the following:	
	SUZI MOORE		
		Name of Person	-
	US PET FOOD LLC		
		Firm/Company	-
	P O BOX 287		
	<u></u>	Address	- ···:
	MT PLEASANT, TX 75456		•
		City/State and Zip Code	- <u> </u>
	smoore@uspetfood.com		;
	E-mail address: (to l	be used for future annual report notification)	<del>-</del>
or fu	rther information concerning this matter, please c	all:	હો
	Suzi Moore	903 573-5202 at ( )	
	Name of Contact Person	Area Code Daytime Telephone Number	-
Mailing Address: Registration Section		Street Address: Registration Section	
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee	
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
	Enclosed is a check for the following amount: Please make check payable to: FLORIDA DE  \$\mathbb{E}\$ \$125.00 Filing Fee  \$\mathbb{D}\$ \$130.00 Filing F  Certificate	ee & 🔲 \$155.00 Filing Fee & 🖂 \$160.00 Filing Fee,	

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

f name unavailable, enter alternate i	name adopted for the purpose of transacting business in Fl	londa. The	alternate name must include "Limited Liability Co	ompany," "E, E, C," or "I
TEXAS		3.	84-1866041	
(Jamsdiction under the law of w	hich foreign limited liability company is organized)	٥.	11 Et number, 11 app	licable)
01-01-2023				
•	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determine	registratio ine penalty	n.) (liability)	
230 STATE LOOP 259		6	P O BOX 287	
treet Address of Principal Office)		G,	(Mailing Address)	
PITTSBURG, TX 7568	36		MT PLEASANT, TX 75456	
Name and street address	s of Florida registered agent: (P.O. Box	NOT:	acceptable)	
Name:	JOSEPH PLEDGER			, ,
Office Address:	18174 SANDY PINES CIRCLE			
	N. FORT MYERS		33917 , Florida	
	(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.

(Registered agent's signature)

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
□Manager	Name: SUZI MOORE	⊡Manager	Name: WILLIAM SCOTT GLOVER
□Member	Address:	■Member	Address: P O BOX 287
■Authorized	MT PLEASANT, TX 75455	□Authorized	MT PLEASANT, TX 75456
Person		Person	
□Other	Other	□Other	Other
□Manager	Name: ANTOINE ALBIN	□Manager	Name:
■Member	Address: 1951 HWY 67E	□Member	Address:
□Authorized	MT PLEASANT, TX 75455	□Authorized	<u></u> -
Person		Person	
□Other	Other	□Other	□Other <u>:</u>
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□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. 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.

Sun Mocre	
	Signature of an authorized person
Suzi Moore	Timed or original name of course

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



Jose A. Esparza Deputy Secretary of State

### Office of the Secretary of State

#### Certificate of Fact

The undersigned, as Deputy Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for U.S. PET FOOD, L.L.C. (file number 803250406), a Domestic Limited Liability Company (LLC), was filed in this office on February 27, 2019.

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 December 20, 2022.

Jose A. Esparza Deputy Secretary of State

Phone: (512) 463-5555 Fax: (512) 463-5709 Dial: 7-1-1 for Relay Services Prepared by: SOS-WEB TID: 10264 Document: 1207313240003

Come visit us on the internet at https://www.sos.texas.gov/





December 14, 2022

SUZI MOORE P O BOX 287 MT PLEASANT, TX 75456 US

SUBJECT: US PET FOOD LLC Ref. Number: W22000154088

We have received your document for US PET FOOD LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Sharon D Franklin Regulatory Specialist II

RECTION

Letter Number: 022A00027849