

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000102499

Entity Name: FOUR LEGGED PET CARE, LLC

Current Principal Place of Business:

1043 NE 114 STREET
BISCAYNE PARK, FL 33161

Current Mailing Address:

1043 NE 114 STREET
BISCAYNE PARK, FL 33161

FEI Number: 27-2313210

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STAMM, JESSICA R
1043 NE 114 STREET
BISCAYNE PARK, FL 33161 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name STAMM, JESSICA R
Address 1043 NE 114 STREET
City-State-Zip: BISCAYNE PARK FL 33161

Title MGRM
Name RAMON, JORGE L
Address 1043 NE 114 STREET
City-State-Zip: BISCAYNE PARK FL 33161

Title MGRM
Name BARTLETT, EDWARD
Address 4217 ROYAL OAK DRIVE
City-State-Zip: PALM BEACH GARDENS FL 33410

Title MGRM
Name PORRES, JOHANNA
Address 11875 SW 49 STREET
City-State-Zip: MIAMI FL 33175

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JESSICA STAMM

MANAGER

04/30/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date