

L210000833563ABC

Florida Department of State

Division of Corporations
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Account Name : HUBCO
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: ABRAHAMESCOBEDO216@GMAIL.COM

FLORIDA LIMITED LIABILITY CO.
NhipbabyKennels LLC

Certificate of Status	1
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DIVISION OF CORPORATIONS
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H21000083356

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

ABRAHAM ESCOBEDO

4821 CRACK WILLOW CT

ORLANDO, FL 32808


(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.
(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.)

ABRAHAM ESCOBEDO

Typed or printed name of signee

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