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(Re	questor's Name)	
(Ad	dress)	
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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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BECRETARY OF STATE

D. SCOTT MAY 3 2017

COVER LETTER

TO:	Registration Sec Division of Corp			••	
SUBJE	CT.	Hershey Dog Properties LLC			
SUBJE	C1	Name of Lim	ited Liability Company		
		Amendment and fee(s) are sub-	-		
		Paul Brannan			
	Firm/Company				
		Sarasota, FL 34233			
			City/State and Zip Code		
		paulbrannan@hotmail.com			
For furth	ner information co	e-mail address: (i	o be used for future annual report notification	PEG 3	
Paul Br	annan		941 921-0400	hone Number P	
Enclose	Name of dis a check for the	Person e following amount:	Area Code Daytime Telep	hone Number FLORID PH 12: 23	
\$25.	.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Hershey Dog F	Properties, LLC				
	(<u>Name of the Limited Liab</u> (A Flor	bility Company as it rida Limited Liability	now appears on our reco Company)	ords.	
The Articles of Organization Florida document number _		/ Company were fi	iled on 12/23/13		and assigned
This amendment is submitte	d to amend the following:	:			
A. If amending name, ente	er the new name of the li	imited liability co	mpany here:		
The new name must be distinguish	hable and contain the words "L	Limited Liability Com	pany," the designation "LI	LC" or the abbrevia	ation "L.L.C."
Enter new principal offices	address, if applicable:				
(Principal office address M	<u>UST BE A STREET ADI</u>	DRESS)			
Enter new mailing address (Mailing address MAY BE)	• • •				
B. If amending the registered agent and/or the			idress on our recor	rds, enter the	name of the ne
Name of New Reg	istered Agent:				, 量 五
New Registered Of	ffice Address:		Enter Florida street addr	ress Fig.	
	_			Florida	R SI
New Registered Agent's Sign	sature, if changing Registe	•	y	2/	Fri 23
registered agent and/or the	e new registered office ac istered Agent: ffice Address:	ddress here:	Enter Florida street addr	SECORE TALLER TO	name of the ne

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 as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>		Address	Type of Action
MGR	Heidi Anderson		5310 Clark Rd #201, Sarasota, FL: 34133	□ Add
				Remove
				Change
				
				☐ Remove
				□ Change
				Add
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ffective date, if other than the	date of filing:	(optional)	
an effective date is listed, the date mus	t be specific and cannot be prior to date of ock does not meet the applicable statu	filing or more than 90 days after filing.) Puratory filing requirements, this date will	not be listed as
		A	平重工
e record specifies a delayed The 90th day after the rec		fective time, at 12:01 a.m. on the section of the s	2 - F
ated April 26	2017	7	ST ST
Paul 1	Paris -		PH 12: 23
	Signature of a member or authorized repr	resentative of a member	

Page 3 of 3

Filing Fee: \$25.00