

L20000315716

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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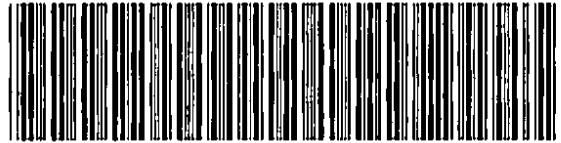
(Business Entity Name)

(Document Number)

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2/30/21

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: POSH PAWS AMENITIES LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARILYN ROJASLEON

Name of Person

POSH PAWS AMENITIES LLC

Firm/Company

700 NE D305

Address

MIAMI, FLORIDA 33138

City/State and Zip Code

info@poshpawsamenities.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARILYN ROJASLEON

Name of Person

at (310) 739-1514

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

POSH PAWS AMENITIES LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on October 06, 2020 and assigned
Florida document number 1.20000315716.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

700 NE 63rd St D 305

(Principal office address MUST BE A STREET ADDRESS)

Miami, FL 33138

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

City

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with 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

[illegible]

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3),

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated 2/5/2021

Signature of a member or authorized representative

Signature of a member or authorized representative of a member

MARILYN ROJAS

Typed or printed name of signee

**Resignation of Member, Managing Member or Manager from a
Limited Liability Company (LLC)**

1. The name of the limited liability company as it appears on the records:

POSH PAWS AMENITIES

LLC

2. This limited liability company was organized under the laws of:

FLORIDA

3. The registration number of this limited liability company is:

853329709

4. I, Jilenny Porras, hereby resign as a Co-owner

(Print Name of Person Resigning)

(Print Title)

of this limited liability company and will not receive a buyout of any amount or consideration of any kind and do hereby swear that the above mentioned limited liability company has been notified of my resignation in writing.

Date 02/02/2021

Signature of Resigning Member, Managing Member or Manager

Witness #1)

Witness #2)

Go to www.AtYourBusiness.com for more free business forms

State of Florida

Department of State

I certify the attached is a true and correct copy of the Articles of Organization of POSH PAWS AMENITIES LLC, a limited liability company organized under the laws of the state of Florida, filed electronically on October 06, 2020 effective October 06, 2020, as shown by the records of this office.

I further certify that this is an electronically transmitted certificate authorized by section 15.16, Florida Statutes, and authenticated by the code noted below.

The document number of this limited liability company is L20000315716.

Authentication Code: 201015144438-800353258048#1

Given under my hand and the
Great Seal of the State of Florida
at Tallahassee, the Capital, this the
Fifteenth day of October, 2020



A handwritten signature in black ink, appearing to read "Laurel M. Lee".

Laurel M. Lee
Secretary of State