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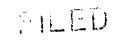
SEP 2 8 2010

EXAMINER

COVER LETTER

TO: Registration Division of C	Section orporations		··	
SUBJECT:	BJECT: Dirt Dog Enterprises LLC			
Sobsect.		ited Liability Company		
The enclosed Articles of	of Amendment and fee(s) are sul	omitted for filing.		
Please return all corres	pondence concerning this matter	to the following:		
	M	MICHAEL E SANDERS		
		Name of Person		
	DIR	DIRT DOG ENTERPRISES		
		Firm/Company		
		803 W HOGLE AVE		
	Address			
		DELAND FL 32720		
		City/State and Zip Code		
	DIRTDOGE	NTERPRISES@YAHOO to be used for future annual report no	.COM	
			tification)	
For further information	concerning this matter, please of	call:		
MICHAEL SANDERS		at (386)	822-9689	
Name	e of Person		ime 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/COUR Registration Sect Division of Corp Clifton Building 2661 Executive (Tallahassee, FL.	orations Center Circle	

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



2010 SEP 27 PM 12: 23

DIRT (<u>Name of the Limited I</u> (A F	DOG ENTERPRISES LLC <u>iability Company as it now appears o</u> Torida Limited Liability Company)	; SECRETARY OF STATE n our rebords)), HASSEE FLORID'A
The Articles of Organization for this Limited Lial Florida document number	· · · ·	11/02/2005 and assigned
This amendment is submitted to amend the follow	ving:	
A. If amending name, enter the new name of t	he limited liability company here:	
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Company,	"the designation "LLC" or the abbreviation
Enter new principal offices address, if applical	ble:	
(Principal office address MUST BE A STREET	ADDRESS)	
	<u> </u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE B	<u>OX)</u>	
B. If amending the registered agent and/or registered agent and/or the new registered offi		records, enter the name of the new
Name of New Registered Agent:	MICHAEL E SANDERS	
New Registered Office Address:	-	
	Enter Florida street address	
	City	, Florida Zip Code
New Registered Agent's Signature, if changing Re	•	ap couc

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 608, 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 the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

. MGR = Manager

MGRM = Managing Member **Title** Name | Address Type of Action DAWN K SANDERS MGRM 803 W HOGLE AVE DELAND EL 32720 Add ✓ Remove ☐ Add Remove ☐ Add Remove ☐ Add Remove □Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) SEPTEMBER 23 Dated_ Signature of a member or authorized representative of a member Michael & Sanders
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00