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EXAMINER



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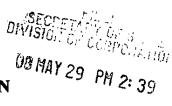
TO: Registration Se Division of Con			
_{SUBJEĊT:} Bryan's	Properties and Investm	ents, LLC	
		ited Liability Company)	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspond	ondence concerning this matter	to the following:	
	Bryan L. Atha		
		(Name of Person)	
	Bryan's Properties a	nd Investments, LLC (Firm/Company)	
,	1077 Prescott Blvd	(Address)	
	Deltona, Florida, 32		
		(City/State and Zip Code)	
For further information	concerning this matter, please o	eall:	
Bryan L. Atha (Name	of Person)	at (386) 804-2228 (Area Code & Daytime 7	Felephone Number)
Enclosed is a check for t	he 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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Bryan's Properties and Investm	nents, LLC	
(<u>Name of the Limited Lial</u> (A Flor	bility Company as it now appears or rida Limited Liability Company)	on our records.)
The Articles of Organization for this Limited Liabili	ity Company were filed on <u>Janu</u>	rary 18, 2006 and assigned
Florida document number <u>L0600006200</u>	.	
This amendment is submitted to amend the following	ng:	·
A. If amending name, <u>enter the new name of the</u>	limited liability company here:	
Harley's Canine General Store, LLC.		
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Company	," the designation "LLC" or the abbreviation
B. If amending the registered agent and/or r registered agent and/or the new registered office		r records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	(Ente	er Florida street address)
<u> </u>	•	, 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 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Michelle D. Gipe-Atha	Delta Connection Academy c/o Michelle D. Gipe Sanford, Fl. 32773	Add Remove
			Add Remove
			Add Remove
			Add Remove
· · · · · · · · · · · · · · · · · · ·			Add Remove
			Add Remove
	ding any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.)	
14	915 Doyle Ro		_
	Deltona, Flori		<u> </u>
PI	hone number: 866-812-5556		
Fa	ax Number: 866-246-4647		
Dated May	123 , 2008 Boran S. (<u>. </u>	
	Bryan L. Atha	r or authorized representative of a member	
	Typed	or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00