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(Requestor's Name)		
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SECRETARY OF STATE

T I L C U

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Daytona Dog House 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:		
David Marshlack Name of Person		
Firm/Company		
2852 20 Avenue No Address St Peters burg, F1 33713 City/State and Zip Code		
St Peters burg, F133713 City/State and Zip Code Clavid @ mailtpa. com E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
David Marshlack at (727, 433-2222 Name of Person Area Code & Daytime Telephone Number		
Enclosed is a check for the following amount: \$\begin{align*} \\$\\$25.00 \text{ Filing Fee} \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\		

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

Daytona Dog House, LLC		
(Name of the Limited Liability Company as if now appears on our records.) (A Florida Limited Liability Company)		
The Articles of Organization for this Limited Liability Company were filed on $\frac{9/7/2007}{1750}$ and assigned Florida document number $\frac{10700001750}{100000000000000000000000000000000000$		
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 end with the words "Limite		
The new name must be distinguishable and end with the words "Limite "L.L.C."	d Liability Company," the designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	ce address on our records, enter the name of the new	
Name of New Registered Agent:	/A	
New Registered Office Address:	Enter Florida street as 128 26	
New Registered Agent's Signature, if changing Registered Agent:	City Forda Forda Forda City Code Constitution of the Code Code Code Code Code Code Code Cod	
I hereby accept the appointment us registered agent and agree the provisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent as pro- being filed to merely reflect a change in the registered office a company has been notified in writing of this change.	te performance of my duties, and I am familiar with and ovided for in Chapter 608, F.S. Or, if this document is	

Page 1 of 2

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member Title **Type of Action Name Address** MGRM David G Marshlack ☐ Add Remove ☐ Add Remove ☐ Add Remove \square Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00