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Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number: I20000000019 Phone : (305)552-5973 : (305)220-1440 Fax Number

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H 1 3 0 0 0 0 0 5 5 4 8 ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	TAILDRED		SITTING			
	(Name of the Limited Liability (A Florida I	Company as i imited Liability	t now appears on our rec y Company)	cords.)		
Γhe A	rticles of Organization for this Limited Liability C	ompany were	filed on	&i	nd assig	gned
Plorid	a document number 4078000934	47				
This a	mendment is submitted to amend the following:					
A. If	amending name, enter the new name of the lim	ited liability c	ompany here:			
The ne	w name must be distinguishable and end with the wor	rds "Limited Lie	ability Company," the desi	ignation "LLC" o	r the at	hreviation
L.L.C				· · ·	_	
Enter	new principal offices address, if applicable:			3-d 1-d	(A)	
Princ	ipal office address MUST BE A STREET ADDR	(ESS)		- 13	ÃR 2	
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	new mailing address, if applicable:					
(Mail)	ng address MAY BE A POST OFFICE BOX)				25	
		~				
B. II regist	amending the registered agent and/or regis ered agent and/or the new registered office add	tered office a ress here:	ddress on our record	s, enter the na	me of	the nev
	Name of New Registered Agent:			·· ·		,
	New Registered Office Address:					
		Enter Florida street address				
				lorida		
		Cin	,	Zip	Code	
NT T İ	locistand Assault Cimeton: If IL D 14	P. A. C. CLARK				

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

Page 1 of 2

MGR = Manager

H13000003548

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:

itte	<u>Name</u>	Address	Type of Action
HGRH	AMBER R. LIPTAK	10966 NORTH BLVD THAPA FL 356/2	Add Remove
			Add Remove
			Add Remove
			Add Remove
	And the second s		Add Remove
			Add Remove
. If amend	ling any other information, enter change	e(s) here: (Attach additional sheets, if necessary.)	
		·	-
ated	3/21 20	Emma)	
	Signature of a member	or authorized representative of a member	•

Page 2 of 2