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COVER LETTER

TO:	Registration Section Division of Corporations
SUBJE	
	(Name of Limited Liability Company)
The en	closed Articles of Amendment and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	(REMOVA) MICHAEL JOSEPH HRTILES (Name of Person)
	Firm/Company)
	JAUENPORT FIM. 3389.6. (City/State and Zip Code)
	CAUENPORT FIM 3389.6. (City/State and Zip Code)
For fur	rther information concerning this matter, please call:
<u>Hic</u>	HASI J. HRTIES at (407) 932-47/0. (Area Code & Daytime Telephone Number)
Enclos	sed is a check for the following amount:
\$25	5.00 Filing Fee \$\ \text{Certificate of Status} \text{S55.00 Filing Fee & Certified Copy (additional copy is enclosed)} \text{\$\ \text{Certified Copy (additional copy is enclosed)}} \tex

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

FILED

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SECRETARY OF STATE TALLAHASSEE FLORIDA

HMERICAN GU	ARDIAN K-922C.	
(<u>Name of the Limited </u>	ability Company as it now appears on ou orida Limited Liability Company)	<u>r records.</u>)
The Articles of Organization for this Limited Liab	ility Company were filed on	and assigned
Florida document number		
This amendment is submitted to amend the following	ing:	
A. If amending name, <u>enter the new name of th</u>	ne limited liability company here:	
The new name must be distinguishable and end with the 'L.L.C."	he words "Limited Liability Company," the	designation "LLC" or the abbreviation
B. If amending the registered agent and/or registered agent and/or the new registered offic		ords, enter the name of the new
Name of New Registered Agent:	x/A	
New Registered Office Address:	N/A- (Enter Flo	rida street address)
	(Cipi)	, Florida(Zip Code)
	(City)	(Zip Code)

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

1

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, 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 Title **Name** <u>Address</u> **Type of Action** Add ☐ Remove ∏Add Remove Add Remove \Box Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) TEASE KEMOUS THIS NAME FROM THE AMERICAN GUARDIAN K-9 LLC. 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