L08000091206

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special Instructions to Filing Officer:
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09 APR -7 AM 9: 56

T. HAMPTON

APR - 8 2009

EXAMINER

COVER LETTER

SUBJECT: Timna Kennels, LLC - change to: The Barking Lot, LLC (Name of Limited Liability Company)						
æd)						
3						

MAILING ADDRESS:

TO:

Registration Section
Division of Corporations

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

Registration Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314

March 26, 2009

Dear Sir / Ma'am;

Please find enclosed a amendment form for my company. It is currently named Timna Kennels, LLC. As this is proving difficult with potential customers, I want to change it to the following:

The Barking Lot, LLC

All the rest of the information and particulars remain the same.

I have enclosed my fee check as well.

Thank you very much,

Laura S. Vinogradov

Owner





RECEIVED

09 APR -7 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

March 31, 2009

LAURA VINOGRADOV 18401 30TH ST LUTZ, FL 33559

SUBJECT: TIMNA KENNELS, LLC Ref. Number: L08000091206

We have received your document for TIMNA KENNELS, LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Letter Number: 509A00010813

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

TIMNA KENNELS, L	LC	
TIMNA KENNELS, L (Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) iability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>レタ8ゅゅゅう</u> りょん	were filed on <u>9/24/08</u>	and assigned
Florida document number $\underline{F} \varphi b \psi \psi \varphi \varphi \gamma \gamma \not = \varphi b$	ı	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
THE BARKING LOT, LIC The new name must be distinguishable and end with the words "Limit "L.L.C."	ed Liability Company," the designation "Ll	.C" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		VISEC VISEC
		APR -
		-7
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		9: 57 9: 57 9: 57
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here	·	е пате of the new
Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:	(D. El. II.	
	(Enter Florida street addr	·ess)
· · · · · · · · · · · · · · · · · · ·	, Florida	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	(City)	(Lip Code)

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

<u> </u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
· · · · · · · · · · · · · · · · · · ·			Add Remove
	·		Add Remove
			Add Remove
			Add Remove
. If amen		nge(s) here: (Attach additional sheets, if necessar	y.)
			SECRETARY OF COR
Dated A	PRIL Z 20 Muna SVin	109.	AM 9: 57
	Signature of a member AURA S.	er of authorized representative of a member VINOGKADOV ed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00