L09000029232

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SECRETARY OF STATE

UIL 10 MB V. HAMPTON

COVER LETTER

DOG GR					
SUBJECT:	COOMING & SUPPLIES LLC				
Name of Limited Liability Company					
The enclosed Articles	of Amendment and fee(s) are sub-	mitted for filing.			
Please return all corres	pondence concerning this matter	to the following:			
	JULIO	MOLINA			
		Name of Person			
	JULIO) MOLINA P.A.			
		Firm/Company			
	2002 (CURRY FORD RD			
		Address			
	ORL	ANDO, FL. 32829			
		City/State and Zip Code			
		BELLSOUTH NET			
		to be used for future annual report notifi	ication)		
For further information	n concerning this matter, please ea	all:			
JULIO	MOLINA	407 228-4757 at ()			
Name	e of Person	Area Code Daytime	Telephone Number		
Enclosed is a check for	the 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

	DOMING & SUPPLIES LLC	
(Name of the Limites	I Liability Company as it now ap A Florida Limited Liability Compa	<u>pears on our records.</u>) ny)
The Articles of Organization for this Limited Lia Florida document number L09000029232	bility Company were filed on	03/25/2009 and assigned
This amendment is submitted to amend the follow	wing:	
A. If amending name, enter the new name of	the limited liability compan	v here:
FUSION PET STYLEZ LLC		
The new name must be distinguishable and contain the wo	rds "Limited Liability Company," t	
Enter new principal offices address, if applica	ble:	TALLAR JU
(Principal office address MUST BE A STREET	'ADDRESS)	The state of the s
		SE S
Enter new mailing address, if applicable:		For E. O
(Mailing address MAY BE A POST OFFICE B	OX)	RIE ZI
B. If amending the registered agent and/o registered agent and/or the new registered offi	_	on our records, enter the name of the
Name of New Registered Agent:	JULIO MOLII	NA
New Registered Office Address:	2002 CURRY FOR	D RD
	Enter	Florida street address
	ORLANDO	, Florida ³²⁸⁰⁶
	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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGRM	FIORDALISA TAVERAS	12143 GRECO DR,	□ Add
		ORLANDO,FL. 32824	■ Remove
			Change
MGRM	ANNETTE C ANDREWS	7674 HARBOR LAKE DR	= Add
		ORLANDO,FL32822	□ Remove
			Change
MGRM	IGRM BRAULIA I PANDALES	5969 LEE VISTA BLVD APT 306	= Add
		ORLANDO,FL. 32822	□ Remove
			Change
			Remove
			Change
			Add
			Remove SECRE ARY OF
			STATE Change

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ffective date, if oth	ner than the date of led, the date must be specificated in this block does date on the Department	ic and cannot be prior to	o date of filing or more	(option e than 90 days after frequirements, this	iling.) Pursuant to	605.0 listed
ite: If the date inser					•	
te: If the date inser						
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ete: If the date inser- cument's effective of record specifies The 90th day aff	s a delayed effective the record is file	of a member or author	_ · ized representative of		15 JUL - SECRETA TALLAHA	"Tl

Page 3 of 3

Filing Fee: \$25.00