

LO90000911689

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

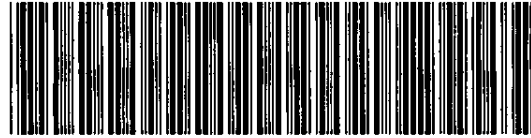
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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15 APR -3 PM 3:27  
FBI - TAMPA

Lc  
Amel  
APR 03 2015

R. WHITE



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 25, 2015

LORI MOORE  
3501-212 DEL PRADO BLVD S  
CAPE CORAL, FL 33904

SUBJECT: PIT BULL USA, LLC  
Ref. Number: L09000091689

We have received your document for PIT BULL USA, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date must be specific and cannot be prior to the date of filing.

Please return 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) 245-6050.

Rebekah White  
Regulatory Specialist II

Letter Number: 315A00005999

15 APR - 3 11 AM 11:58

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Pit Bull USA LLC

\_\_\_\_\_  
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:

Lori Moore

\_\_\_\_\_  
Name of Person

Cape Coral Accounting Service LLC

\_\_\_\_\_  
Firm/Company

3501-212 Del Prado Blvd S

\_\_\_\_\_  
Address

Cape Coral, FL 33904

\_\_\_\_\_  
City/State and Zip Code

lmoore@capecoralaccounting.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lori Moore

at 239 542-2558

\_\_\_\_\_  
Name 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 **FILED**  
OF**

15 APR -3 PM 3:27

Pit Bull USA LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 09/22/2009 and assigned  
Florida document number L09000091689.

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 "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

**(Principal office address MUST BE A STREET ADDRESS)**

3501-212 Del Prado Blvd S

Cape Coral FL 33904

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

3501-212 Del Prado Blvd S

Cape Coral, FL 33904

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

*Enter Florida street address*

Florida

*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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

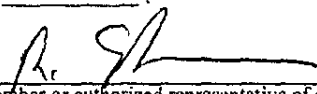
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
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		_____	

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*


E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated February 27, 2015

  
Signature of a member or authorized representative of a member

Ralf Sturm

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00