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Certified Copies	ertified Copies Certificates of Status				
Special Instructions to	Filing Officer:				
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Office Use Only



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FILED

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SECRETARY OF STATE

K. SALY EXAMINER DEC 2 0 2010



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 9, 2010

WOOF WASH MOBILE DOG GROOMING, LLC TOMAS A. ARIAS 216 NW 21ST STREET WILTON MANORS, FL 33311

SUBJECT: WOOF WASH MOBILE DOG GROOMING, LLC

Ref. Number: L10000079044

We have received your document for WOOF WASH MOBILE DOG GROOMING, LLC and your check(s) totaling \$35.00. 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.

The new name must have LLC on the end. This is not a corporation, therefore it cannot have the suffix "INC.".

Please return your document, along with a copy of this letter, within 60 days or your filling will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6870.

Karen A Saly Regulatory Specialist II

Letter Number: 910A00028578

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Wash Mobil Dog Grooming 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:
Tomas Arias Name of Person
Top Dog Mobile Grooming
216 NW 215t Street
City/State and Zp Code
E-mail address: (to boused for future annual report notification)
For further information concerning this matter, please call:
Tomas Arias at (954) 732-619 U Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount: \$25.00 Filing Fee

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

FILED

10 DEC 17 AM 11: 14

Woof Wash.		rooming, let	CLAHASSEE, FLORIDA
(<u>Name of the Limited Liabi</u> (A Florid	lity Company as it now app da Limited Liability Compan	pears on our decords.) ny)	
The Articles of Organization for this Limited Liability Florida document number <u>L1000007904</u>	y Company were filed on _	7/28/10	and assigned
			
This amendment is submitted to amend the following			
A. If amending name, enter the new name of the l	imited liability company	here:	
Top Dog Mobile The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Co	mpany," the designation "	'LLC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AD	DRESS)		··
Enter new mailing address, if applicable:	<u> </u>		
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>		
	•		
B. If amending the registered agent and/or re registered agent and/or the new registered office a	gistered office address o ddress here:	n our records, <u>enter</u>	the name of the new
Name of New Registered Agent:			
New Registered Office Address:		77 - 17 - 1	1
		Enter Florida street ad	aress
		, 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 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				
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action	
			Add Remove	
			Add Remove	
	· ·		Add	
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D. If amend	ling any other information, enter char	nge(s) here: (Attach additional sheets, if necessary.)	_	
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Dated	ecember 14, 2	010.		
		per or authorized representative of a member A consideration of the second of the sec		

Page 2 of 2

Filing Fee: \$25.00