L100000 79638

(Re	questor's Name)	_
(Ad	ldress)	
·	•	
(6.1	TICLE IN	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(D.		>
(Bu	isiness Entity Nar	nej
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
	_	
Special Instructions to	Filing Officer:	



500186199455

10/04/10--01006--009 **25.00

SECRETARY OF SIMILE DIVISION OF CORPORATION

Office Use Only

COVER LETTER

TO:

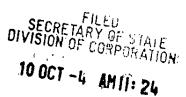
Registration Section

partial and a larger of the salation of the salation of the control of the salation of the sal

Division of Co	orporations		
SUBJECT:	ARTISAN	DOG CAFE LLC	
SUBJECT:		ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sul	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	NI	CHOLAS A. ANNENOS Name of Person	
		Name of Leison	
		Firm/Company	
	2691 SABAL S	SPRINGS CIRCLE (BLDG L	# 103)
		Address	
	CLI	EARWATER, FL. 33761	
		City/State and Zip Code	
	E-mail address: (to be used for future annual report notifica	ation)
For further information	concerning this matter, please of	call:	
NICHO	LAS A ANNENOS	at (_727)4	83-8441
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)
Regis Divisi	LING ADDRESS: tration Section on of Corporations	STREET/COURIE Registration Section Division of Corporat	
	Box 6327 passee, FL 32314	Clifton Building 2661 Executive Cent	er Circle

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



	TISAN DOG CAFE LLC Liability Company as it now appea Florida Limited Liability Company)		·	
The Articles of Organization for this Limited Liz Florida document numberL10000079	, , ,	JULY 29, 2010	and assigned	
This amendment is submitted to amend the follo	wing:			
A. If amending name, enter the new name of	the limited liability company he	<u>re</u> :		
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Comp	any," the designation "L	LC" or the abbreviation	
Enter new principal offices address, if applica	ible:	·		
(Principal office address MUST BE A STREET	(ADDRESS)			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE B	<u> </u>			
				
B. If amending the registered agent and/o registered agent and/or the new registered off		our records, <u>enter th</u>	ne name of the new	
Name of New Registered Agent:	NICHOLAS A. ANNENOS			
New Registered Office Address:	2691 SABAL SPRINGS CI	RCLE		
-	Enter Florida street address			
	CLEARWATER	, Florida	33761	
	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

MGRM GARY A. URSO 1700 SUNSET DR CI FARWATER FL 33755 Add Remove	or Managin MGR = Ma	g Member being added or removen mager	ed from our records:	
MGRM GARY A. URSO 1700 SUNSET DR. Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated 9 23 2010, Signature of a member or authorized representative of a member	MGRM = N	Managing Member		
CIFARWATER FL 33755 Remove Add Remove Add Remove Add Remove Add Remove Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated 9 23 2010, Signature of a nember or authorized representative of a member	<u>Title</u>	<u>Name</u>	Address	Type of Action
Dated 9 23 2010, Signature of a member or authorized representative of a member	MGRM	GARY A. URSO	1700 SUNSET DR. CLEARWATER, FL. 33755	
Dated 9 23 2010, Signature of a member or authorized representative of a member				
Dated 9 23 2010, Signature of a member or authorized representative of a member				
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated 9 23 2010, Signature of a member or authorized representative of a member				
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated 9 23 2010, Signature of a member or authorized representative of a member				
Dated 9 23 2010, Signature of a member or authorized representative of a member		·		
Dated 9 23 2010, Signature of a member or authorized representative of a member	D. If amend	ding any other information, enter	change(s) here: (Attach additional sheets, if necessary	·.)
Dated 9 23 2010, Signature of a member or authorized representative of a member	_			DIVISE
Signature of a member or authorized representative of a member				——
	Dated	Nul	A Com	Mit. 24
NICHOLAS A ANNENOS		_	·	<u>z</u>

Page 2 of 2

Filing Fee: \$25.00