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SECRETARY OF STATE

J. SAULSBERRY EXAMINER

SEP 0 6 2011

## **COVER LETTER**

TO: Registration ! Division of Co			•	
SUBJECT: Donte	's Den Productions, LLC			
	Name of Lin	nited Liability Company		
The enclosed Articles o	f Amendment and fee(s) are so	ubmitted for filing.		
Please return all corresp	ondence concerning this matte	er to the following:		
	Marsha R. Panuce			
		Name of Person		
		Firm/Company		
	483 Meadow Lark I		SECRETI SECRETI	5 ' = 2 <del>-</del> 1
	Corosoto Elevido 24	Address	ETARY HASSE	, <u> </u>
	Sarasota, Florida 34	City/State and Zip Code	m	[percent
	Marsha@panucci.co	m	of's TA	ب ار ا
For further information of	eoncerning this matter, please	to be used for future annual report notificat call:	on) A O N	3
Marsha R. Panuce	,	at (941 ) 7 <del>41-0228</del>	373.9852	
Name o	f Person	Area Code & Daytime To	lephone Number	
Enclosed is a check for the	ne 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 enclose	d)
Registra	ING ADDRESS: ation Section n of Corporations	STREET/COURIER Registration Section Division of Corporatio		

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Donte's Den Productions,			
( <u>Name of the Limited</u> (A	Liability Compan Florida Limited Li	y as it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Li	ability Company v	were filed on 11/30/2010	and assigned
Florida document number <u>L10000123023</u>			
This amendment is submitted to amend the follo	wing:		
A. If amending name, enter the new name of	the limited liabil	ity company here:	
Dogevity, LLC			
The new name must be distinguishable and end with "L.L.C."	the words "Limite	d Liability Company," the designation	"LLC" or the abbreviation
Enter new principal offices address, if applica	ible:		
(Principal office address MUST BE A STREE	T ADDRESS)		<u> </u>
Enter new mailing address, if applicable:			P-I
	2010	,	
(Mailing address MAY BE A POST OFFICE 1	<u>30X)</u>		
			<del></del>
B. If amending the registered agent and/o registered agent and/or the new registered off			r the flame of the new
Name of New Registered Agent:	Marsha R. Pa	nuce	
New Registered Office Address:	483 Meadow	Lark Drive	
		Enter Florida street a	ddress
	Sarasota	, Florida	34236
		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:

k = Mar kM = N	nager fanaging Member		
	Name	Address	Type of Action
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amend	ling any other information, enter chan	ge(s) here: (Attach additional sheets, if necessary	y.)
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			2011 SEP SECRETA ALLAHAS
44		``	-2 SEE.
	8-26 , 20		AM 8: 52 FSTATE FLORIDA
	Signature of a member	er or authorized representative of a member	
	Marsha R. Panuce, Manag		

Page 2 of 2

Filing Fee: \$25.00