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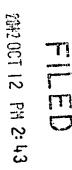
(Re	equestor's Name)			
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PICK-UP	MAIT	MAIL		
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Certified Copies	_ Certificates	s of Status		
Special Instructions to	Filing Officer:			

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J. BRYAN
OCT 1 6 2012
EXAMINER

Florida Department of State Division of Corporations PO BOX 6327 Tallahassee, FL, 32314 ATTN: Registration Section 10-09-12

RE: Amend the Articles of Organization - Name change for LLC

Attention Registration Section:

Please change the name of our LLC.

FROM: Caribbean Canines LLC TO: Lemon Bay Enterprises LLC

Enclosed:

• Completed Amendment form for name change

Copy of Certificate of Status for Caribbean Canines LLC

If you have any questions, please feel free to contact me at 508-454-6081.

Sincerely;

James Botelho

1966 Greenlawn Drive

Englewood, FL, 34223

508-454-6081

lemonbayenterprises@gmail.com

COVER LETTER

Division of Cor	rporations			
SUBJECT:	Caribbe			
	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are su	bmitted for filing.		
Please return all correspo	ondence concerning this matte	r to the following:		
		James Botelho		
	<u>.</u>	Name of Person	•	-
	_			高 る つ
	Caribbean Canines LLC			
		Firm/Company		No lan
		1966 Greenlawn Drive		
	***************************************	Address		
	,	Table 1 24000		FILED PIZES
		Englewood, FL, 34223 City/State and Zip Code		
•	lomon		oom	
	E-mail address:	bayenterprises@gmail. (to be used for future annual repor	rt notification)	
For further information of	concerning this matter, please	call:		
	, , , , , , , , , , , , , , , , , , ,			
Ja	mes Botelho	at (508)	454-6081	
Name o	of Person	Area Code & I	Daytime Telephone Numb	ег
Enclosed is a check for t	the following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is en	Certific	iling Fee, cate of Status & ed Copy onal copy is enclosed)
MAII	INC ADDRESS.	CTDEET/C	OUDIED ADDDESS.	

MAILING ADDRESS:

TO:

Registration Section

Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

Registration Section Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Caribbean C	anines LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears Liability Company)	s on our records.)	
The Articles of Organization for this Limited Liability Company were filed on		08-10-11	and assigned
Florida document number L11000091937			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here	2:	
Lemon Bay Ent	erprises LLC		
The new name must be distinguishable and end with the words "Lim "L.L.C."	ited Liability Compar	ny," the designation	"LLC" or the abbreviation
Enter new principal offices address, if applicable:	NA		
(Principal office address MUST BE A STREET ADDRESS)			इंग्लंब ना
			<u> </u>
	,		2 m
Enter new mailing address, if applicable:	N/A	·	
(Mailing address MAY BE A POST OFFICE BOX)	· · ·		- 12
		<u> </u>	<u> </u>
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		ur records, <u>ente</u>	the name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Ent	er Florida street a	ddress
		, 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	<u>n</u>
N/A			Add Remove	
			Add Remove	
			Add Remove	
			Add Remove	
			Add Remove 	
			Add Remove	
D. If amendia	ng any other information, enter change(2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -	1 12 P	
Dated	October 9 , 201 Signature of a member of	2		
/-		ames Botelho r printed name of signee		

Page 2 of 2

Filing Fee: \$25.00