L12000079012

| (Re | equestor's Name) | |
|-------------------------|--------------------|-----------|
| (Ad | ldress) | |
| . (Ac | ldress) | |
| (Ci | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | isiness Entity Nan | ne) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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'AUG 1 2 2015 T. HAMPTON

COVER LETTER

| Divis | sion of Corpo | rations | | |
|-----------------|----------------|--|---|--|
| SUBJECT: | Thee Dawgg I | House, LLC | | |
| • | | Name of Limit | ted Liability Company | |
| | | | | |
| The enclosed | Articles of An | nendment and fee(s) are subn | nitted for filing. | |
| Please return | all correspond | ence concerning this matter to | o the following: | |
| - | | Verna Bartlett | | |
| | | | Name of Person | |
| | | | | |
| | | · · | Firm/Company | |
| | | 303 S Melville Avenue | | |
| | | | Address | |
| | | Tampa, FL 33606 | | |
| | | | City/State and Zip Code | · · · · · · · · · · · · · · · · · · · |
| | | sigoffices@gmail.com | o be used for future annual report r | notification |
| For further int | formation con | cerning this matter, please ca | | our values on y |
| | | ocining this matter, prease ou | | |
| Verna Bartlet | Name of P | omon | 813 433-4810 at () Area Code Day | tima Talanhana Numbar |
| | Name of 1 | EISON | Alca Code Day | ume receptione routibes |
| Enclosed is a | check for the | following amount: | | |
| □ \$25.00 Fi | ling 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:

TO:

Registration Section

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

| Nome of the Limi | ted Lightlity Company as it now appears on our reco | ande \ |
|---|--|----------------------------------|
| (Name of the Laum | ted Liability Company as it now appears on our reco (A Florida Limited Liability Company) | <u>nus.</u>) |
| The Articles of Organization for this Limited L Florida document number L12000079012 | iability Company were filed on June 13, 2012 | and assigned |
| This amendment is submitted to amend the following | owing: | |
| A. If amending name, enter the new name of | of the limited liability company here: | |
| The new name must be distinguishable and contain the | words "Limited Liability Company," the designation "L | LC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if applie | cable: | |
| (Principal office address MUST BE A STREI | ET ADDRESS) | AREC TO |
| | | Fin 67 |
| Enter new mailing address, if applicable: | | SSEE I |
| (Mailing address MAY BE A POST OFFICE | BOX) | FLOT II |
| | | |
| B. If amending the registered agent and registered agent and/or the new registered of | or registered office address on our recoffice address here: | |
| Name of New Registered Agent: | Verna Bartlett | |
| New Registered Office Address: | | |
| | Enter Florida street add | tress |
| | | Florida |
| | City | Zip Code |

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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|--------------|------------------|---------------------------------------|-----------------------------------|
| Mgr | Lewis Mustard Jr | 303 S Melville Avenue | Add |
| | | Tampa, FL 33606 | ■ Remove |
| • | | | Change |
| Mgr | Verna Bartlett | 303 S Melville Avenue | = Add |
| | | Tampa, FL 33606 | Remove |
| | | | □ Change |
| | | | Add |
| | | · · · · · · · · · · · · · · · · · · · | ☐ Remove |
| | | | Change |
| | | | Add SECONDO Remove ASSED Change |
| | | | FLORIDA Add |
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| | | | □ Change |

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| ective date, if other that effective date is listed, the da | n the date of filir | August 7, 20 | 15 | (optio | nal) | |
| te: If the date inserted in temperature of the date inserted in temperature date on | his block does not | meet the applical | o date of fining of fic | | | |
| record specifies a del he 90th day after the | | | an effective ti | me, at 12:01 a | .m. on the | earlier |
| ed August 7 | | 2015 | | | SE(| 5 |
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Page 3 of 3

Filing Fee: \$25.00