L12000140103

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2012 DEC 14 PH 12: 3
SECRETARY OF STATE

N CHILBRAN MET 17 2002

COVER LETTER

Division of Co	orporations				
SUBJECT:	DOG	SADOM LLC			
SOBJECT:		ited Liability Company			
The enclosed Articles of	of Amendment and fee(s) are sul	bmitted for filing.			
Please return all corres	pondence concerning this matte	r to the following:			
		Name of Person			
	IENT, LLC				
		Firm/Company			
	2801 NF 208	2801 NE 208TH TERRACE, SECOND FLOOR			
	Address				
	A	AVENTURA, FL 33180			
	· · · · · · · · · · · · · · · · · · ·	City/State and Zip Code			
	BIANCA@	BIANCA@TEAMREMANAGEMENT.COM E-mail address: (to be used for future annual report notification)			
For further information	concerning this matter, please	·			
BIAN	ICA SAPORITTO	at (305)	454-0915		
	of Person		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 er	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
MAI	LING ADDRESS:	STREET/C	OURIER ADDRESS:		

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

ŢO:

Registration Section

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

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION 2012 DEC 14 PH 12: 31 TO

SECRETARY OF STATE TALLAHASSEE, FLORIDA

FILED

	DOGADOM LLC				
(<u>Name of the Limited Lia</u> (A Flo	<mark>bility Company as it now арреат</mark> rida Limited Liability Company)	s on our records.)	_		
The Articles of Organization for this Limited Liabil	ity Company were filed on	11/05/2012	and assigned		
Florida document numberL12000140103	3				
This amendment is submitted to amend the following	ng:				
A. If amending name, enter the new name of the	limited liability company her	<u>e</u> :			
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Compa	ny," the designation "L	LC" or the abbreviation		
Enter new principal offices address, if applicable	<u> </u>				
(Principal office address MUST BE A STREET A.	DDRESS)				
Enter new mailing address, if applicable:		 .			
(Mailing address MAY BE A POST OFFICE BOX	<u></u>				
B. If amending the registered agent and/or r registered agent and/or the new registered office		our records, <u>enter t</u>	he name of the new		
Name of Nam Deviators d. A. cont.					
Name of New Registered Agent:					
New Registered Office Address:	New Registered Office Address: Enter Florida street address				
		, Florida			
_	City	, rioi wa	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 amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member <u>Title</u> **Name Address Type of Action** MGR **TEAM REAL ESTATE** 2801 NE 208TH TERRACE ✓ Add Remove SECOND FLOOR AVENTURA, FL 33180 ☐ Add Remove ☐ Add ☐ Remove Remove Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) **DECEMBER 11** Dated _ Signature of a member or authorized representative of a member **BIANCA SAPORITTO** Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00