

L 12000158763

From: Daniel Hicks P.A.

To: 1806176383

01/25/2013 15:17

#523 P.000005

Division of Corporations

Page 1 of 1

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : DANIEL HICKS, P.A.
Account Number : 075061003325
Phone : (352)351-3353
Fax Number : (352)351-8054

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

RECEIVED
13 JAN 25 PM 3:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
WHAT'S GOOD FOR THE HORSE, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

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EXAMINER
JAN 28 2013

Electronic Filing Menu

Corporate Filing Menu

Help

From: Daniel Hicks P.A.

To: 18506176383

01/25/2013 15:58

#523 P.002/005

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: What's Good for the Horse, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sheila Howard

Name of Person

Daniel Hicks, P.A.

Firm/Company

421 South Pine Avenue

Address

Ocala, FL 34471

City/State and Zip Code

sheila@danielhickspa.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sheila Howard

Name of Person

at (352) 351-3353

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)

MAILING ADDRESS:
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

FILED
13 JAN 25 AM 11:12
CLERK OF STATE
TALLAHASSEE, FLORIDA

((H13000019704 3)))

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

WHAT'S GOOD FOR THE HORSE, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 12/18/2012 and assigned
Florida document number 112000158763

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

WHAT'S BEST FOR THE HORSE, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City, Florida 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

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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>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

((H13000019704 3))

✓
From: Daniel Hicks P.A.

To: 18506176383

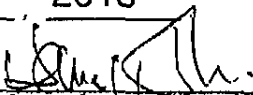
01/25/2013 15:58

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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated January 25, 2013



Signature of a member or authorized representative of a member

Daniel Hicks, Esq., Daniel Hicks, P.A. (Attorney for LLC)

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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