L13000030822

Office Use Only



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FILED
2013 JUL 17 PM 1: 40
SECRETARY OF STATE
ARRESEE, PLORIDA

N. Cuffgan JUL 18 2013

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: CAPTIVATING ACRES PET RESORT LA
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Sharon Welsh Name of Person
Captivating Acres Pet Resort LLC
1759 Plummer Roap Address
Jacksonville, Fl 32219 Swelsh @ dsi.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (904 7/6-6/6 2) Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) 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

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

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	SECRETARY OF STATE
Captivating Ac	SECRETARY OF STATE TYPES PET RESOLUTION THE STATE TH
(Name of the Limited Liability Co (A Florida Limi	ompany as it now appears on our records.) ited Liability Company)
	pany were filed on <u>Feb. 28, 2013</u> and assigned
Florida document number <u>L130003082</u> .	·
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	l liability company here:
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS	<u></u>
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered agent and/or the new registered office address	ed office address on our records, enter the name of the new s here:
	
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, 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 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 = Ma	naging Member			
<u>Title</u>	Name	Address	0059 0/200	Type of Action
MGRM	Michael D. Kas	isnoff	Jacksonville, FL	Add
			52219	Remove
				.
				Add
				Remove
				- Add
				
				Remove
				Add
				Remove
				
		· · · · · · · · · · · · · · · · · · ·		Add
				Remove
		 		
				Add
				Remove
)				

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
-	
-	
-	
Dated	July 1, 2013.
	Sharon J. Welsh
	Signature of a member or authorized representative of a member
	Typed or printed name of signee

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Filing Fee: \$25.00

