## L13000040949

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## **COVER LETTER**

TO: Registration Se Division of Cor			
SUBJECT: 816	FDOG TAVES FM. Name of Limit	1ewts LLC led Liability Company	<del></del> -
The enclosed Articles of	Amendment and fee(s) are subn	nitted for filing.	
Please return all correspo	ndence concerning this matter to $S_{16}$	o the following:  Hereby Control  Name of Person  LAVESTM	ents LLC
	3014 1 PANAN	Firm/Company  Lisenby Auc  Address  Address  City/State and Zip Code	Juit 6 32405
For fugther information c	JHR+Ch I E-mail address: (to oncerning this matter, please ca	·	VING - NET
Name o	Tetcher Person	at ( <u>850</u> ) <u>52</u> Area Code Daytin	7-2706 ne Telephone Number
Enclosed is a check for th	ne following amount:		<b>t</b>
□ \$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

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

Street Address:
Registration Section
Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee. FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

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3. / -		a de 11	0		
Big Dog I	West ME	SUTS LL	<u>-,                                    </u>		
(Name of the Limited	Liability Company Florida Lumited Lia	y as it now appears on ability Company)	our records.)		
·			2/15/20/2		
The Articles of Organization for this Limited Liab Florida document number <u>L 1300c0</u> 4	oility Company v 10949	vere filed on3	110/2005	and assigne	rd
This amendment is submitted to amend the follow	/ing:				
A. If amending name, enter the new name of t	he limited liabil	ity company here:			
A1 / A.					
The new name must be distinguishable and contain the wor	ds "Limited Liabilit	y Company," the desig	nation "LLC" or the ab	breviation "L.L.C."	
Enter new principal offices address, if applicat	ole:	_N/A		2023 S.F.C	
(Principal office address MUST BE A STREET	ADDRESS)			<u> </u>	11
Enter new maifing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>0X)</u>			ARY CE STATE	+ED
B. If amending the registered agent and/or regagent and/or the new registered office address	gistered office a here:	ddress on our reco	ords, <u>enter the nan</u>	ie of the new re	gistered
Name of New Registered Agent:	<u> </u>				
New Registered Office Address:	$\frac{N/A}{}$	Enter Florida	strect address		<u> </u>
			, 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 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 Type of Action Title (Change ) Change  $\square$ Add □Remove □Change □Add **□**Remove \_\_\_\_\_ □Change □lAdd □Remove □Change □Add □Remove

□Change

If amendi	ng any other information	, enter change(s) here:	(Attach additional she	eets, (f necessary.)
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. Effective	date, if other than the da	ite of filing: <u>JA72</u>	the filling of more than	(optional)
(If an effect	ve date is listed, the date must be the date inserted in this block	e specific and cannot be prior c does not meet the applic	able statutory filing requ	an 90 days after filing.) Pursuant to 605.0207 tirements, this date will not be listed as
documen	's effective date on the Depa	artment of State's records.		
the record's	pecifies a delayed effective d	late, but not an effective ti	me, at 12:01 a.m. on the	earlier of: (b) The 90th day after the
cord is filed	· /			
	///			
Dated	12/27/2022/	·	<u> </u>	
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	Si	gnature of a member or auth	orized representative of a t	nember
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Filing Fee: \$25.00