

L14000141695

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

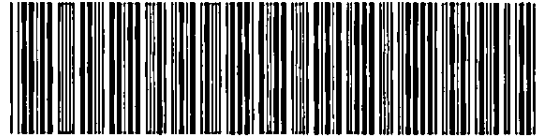
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300319753423

10/17/18--01053--030 **25.00

RECEIVED

OCT 16 2018

FILED
18 OCT 16 PM 9:10
TALLAHASSEE, FLORIDA

← SALY

OCT 29 2018

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: PAMPERED PAWS OF ORLANDO 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:

TANYA SILVANO

Name of Person

Firm/Company

1746 ALVARADO COURT

Address

LONGWOOD, FLORIDA 32779

City/State and Zip Code

BARK@PAMPEREDPAWSOFORLANDO.COM

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

For further information concerning this matter, please call:

TANYA SILVANO

407

928-8722

at (_____) _____

Name of Person

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

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

PAMPERED PAWS OF ORLANDO LLC

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

FILED
18 OCT 16 PM 9:10
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 9/11/2014 and assigned
Florida document number L14000141695.

This amendment is submitted to amend the following:

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

The new name must be distinguishable and contain 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)

19976 INDEPENDENCE BLVD.

GROVELAND, FL 34736

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

19976 INDEPENDENCE BLVD.

GROVELAND, FL 34736

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:

DAVID FARRINGTON

New Registered Office Address:

19976 INDEPENDENCE BLVD.

Enter Florida street address

GROVELAND

City

Florida 34736

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.


David Farrington

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>	<u>Address</u>	<u>Type of Action</u>
MGR	ALBEIRO PALACIO	1746 ALVARADO COURT	<input type="checkbox"/> Add
		LONGWOOD, FL 32779	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	TANYA SILVANO	1746 ALVARADO COURT	<input type="checkbox"/> Add
		LONGWOOD, FL 32779	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MBR	ZACKARY PALACIO	1746 ALVARADO COURT	<input type="checkbox"/> Add
		LONGWOOD, FL 32779	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	DAVID FARRINGTON	19976 INDEPENDENCE BLVD.	<input checked="" type="checkbox"/> Add
		GROVELAND, FL 34736	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

FILED
OCT 16 PM 9:11
CLERK OF COURT
JUDICIAL CIRCUIT IN AND FOR
FLORIDA

18 OCT 16
LINDS CO. FLORIDA

18 OCT 16 PM 9:10
FALLS CHURCH, VIRGINIA

E. Effective date, if other than the date of filing: _____ (optional)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated SEPTEMBER 20 2018

Signature of a member or author

TANYA SILVANO

Page 3 of 3

Filing Fee: \$25.00