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K.SALY EXAMINER JUN - 4 2015

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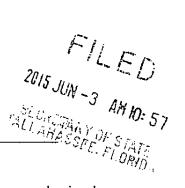
TO: Registration Se Division of Con	ection rporations		
CHERYL'S	S DOG GROOMING L.L.C.		
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspondence	ondence concerning this matter	to the following:	
	Cheryl Ziser		
		Name of Person	
	Cheryl's Dog Grooming L.	L.C.	
		Firm/Company	
	1893 Pleasant Drive		
		Address	
	Juno Beach, Florida 33408		
	Sophiejo4040@yahoo.com	City/State and Zip Code	
	E-mail address: (to be used for future annual report notifi	cation)
For further information c	oncerning this matter, please ca	all:	
Cheryl Ziser		561 444 6840	
Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	ne 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
į	•		(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



CHERYL'S DOG GROOMING L.L.C.

(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 v Florida document number	were filed on $\frac{01/01/20}{}$	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
The new name must be distinguishable and contain the words "Limited Liability	y Company," the designa	tion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
		
75 / 11 11 10 11 11		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	-	
(Maturing address MAT BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here Name of New Registered Agent:		records, enter the name of the new
New Registered Office Address:	Enter Florida str	reet address
		, Florida Zip Code
	City	Z ip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office a company has been notified in writing of this change.	performance of my a rovided for in Chapt	uties, and I am familiar with and er 605, F.S. Or, if this document is

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>	Name	<u>Address</u>	Type of Action
MGR	Deborah A. Mauser	1893 Pleasant Drive, Juno Beach, I	Add
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			Remove
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tive date, if other than	the date of filin	ø:		(on	tional)
ffective date is listed, the date	must be specific and	d cannot be prior to	date of filing or mo	ore than 90 days aft	ter filing.) Pursuant to 605.02
If the date inserted in this nent's effective date on the	i block does not r	neet the applicab	le statutory filing	g requirements, th	his date will not be listed
nent 3 circuite date on an	. Department of a	state 3 records.			
cord specifies a delage e 90th day after the r			an effective ti	ime, at 12:01	a.m. on the earlier
e sour day arter the r	ecora is inea.				
May I		2015			
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Odtan	12	·~~			<u> </u>
Ottan	Signature of (thember or authori	zed representative	of a member	

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Filing Fee: \$25.00