## L1500021186

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J. HARRIE

## **COVER LETTER**

	Registration Sec Division of Corp					
eno iec	Dog Spot of	Ocala, LLC				
SUBJEC	l:	Name of Limi	ited Liability Company			
The enclo	sed Articles of A	mendment and fee(s) are subr	mitted for filing.			
Please ret	urn all correspon	dence concerning this matter	to the following:			
		Richard Andrews, Jr.		,		
			Name of Person			
		Red Fern Pet Lodge				
Firm/Company						
	1539 NE 22nd Avenue, Suite D					
		Ocala, Fl 34470				
		City/State and Zip Code				
		andrews.dick@gmail.com				
		E-mail address: (1	to be used for future annual report notificat	tion)		
For further	er information co	ncerning this matter, please ca	all:			
Richard	Andrews, Jr.		352 817-7771			
	Name of	Person	Area Code Daytime To	elephone Number		
Enclosed	is a check for the	e following amount:				
□ \$25.0	00 Fiting 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

Dog Spot of Ocala, LLC			
(Name of the Limit	ted Liability Compa (A Florida Limited)	ny as it now appears on our recor Liability Company)	rds.)
The Articles of Organization for this Limited Liability Company of Clorida document number L15000021186		were filed on February 4, 201	5 and assigned
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name o	f the limited liab	ility company here:	
Red Fern Pet Lodge. LLC			
The new name must be distinguishable and contain the v	vords "Limited Liabi	lity Company," the designation "LI	C" or the abbreviation "L.L.C."
the new name must be distinguishable and contain the words "Limited nter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS.	cable:	No change	17
(Principal office address MUST BE A STREE	ET ADDRESS)		77
			<u> </u>
			프 (GB
Enter new mailing address, if applicable:		No change	A (55) 5 (5)
(Mailing address MAY BE A POST OFFICE	BOX)		29
B. If amending the registered agent and registered agent and/or the new registered o	-		ds, enter the name of the n
New Posistand Office Address	No change	ν.	
New Registered Office Address:		Enter Florida street addi	ress
		.1	Florida
	<del></del>	City	Zip Code
New Registered Agent's Signature, if changing	Registered Agent:	1	
I hereby accept the appointment as registere provisions of all statutes relative to the prop			

If Changing Registered Agent, Signature of New Registered Agent

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 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

<u>Γitle</u>	Name	Address	Type of Action
			Add
			Remove
			Change
<del></del>			Add
			Remove
			Change
<del></del>	<del></del>		
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			Remove
			□ Change

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ective date, if other than the neffective date is listed, the date mute: If the date inserted in this becoment's effective date on the I	ist be specific and cannot be lock does not meet the ap	prior to date of filing o oplicable statutory fi	r more than 90 days a	otional) fter filing.) Pursuant to this date will not be	605.02 listed
record specifies a delaye he 90th day after the re		t not an effectiv	e time, at 12:0	1 a.m. on the ea	arlier

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Filing Fee: \$25.00