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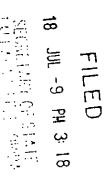
(Requestor's Name)	<u>-</u>
(Address)	
(Address)	
(City/State/Zip/Phone	e #)
PICK-UP WAIT	MAIL
(Business Entity Nar	ne)
(Document Number)	<u> </u>
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JUL 1 7 2018

COVER LETTER

	egistration Se ivision of Cor				
end iewe	Golden Vic	w Dog Training, LLC			
SUBJECT	:		nited Liability Company		
The enclos	ed Articles of .	Amendment and fee(s) are sub	omitted for filing.		
Please retu	m all correspo	ndence concerning this matter	to the following:		
		Carla W. Richards			
			Name of Person		
		Carla W. Richards, LLC			
Firm/Company					
		8919 NW County Road 23	35		
			Address		
		Alachua, FL 32615			
			City/State and Zip Code		
		carla.w.richards@gmail.coi			
			to be used for future annual report notif	ication)	
For further	information co	oncerning this matter, please co	all:		
Carla W. R	tichards		352 745.0147		
	Name of	Person	at ()	Telephone Number	
Enclosed is	a check for th	e 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 Fiting Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	

MAILING ADDRESS:

TO:

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

FILED

SELL SUL -9 PH 3: 18

ALL SUL -9 PH 3: 18

Golden View Dog Training, LLC

company has been notified in writing of this change.

(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	were filed on 10 December 2015 and assigned			
Florida document number L15000206178				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company here:			
Carla W. Richards, LLC				
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable:	8919 NW County Road 235			
(Principal office address MUST BE A STREET ADDRESS)	Alachua, FL 32615			
Enter new mailing address, if applicable:	8919 NW County Road 235			
(Mailing address MAY BE A POST OFFICE BOX)	Alachua, FL 32615			
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address 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 agre provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office	performance of my duties, and I am familiar with and provided for in Chapter 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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = N AMBR = N	Manager Authorized Member		FILED 18 JUL -9 PM 3: 18 1 SECRETARY AND	
<u>Title</u>	<u>Name</u>	Address	SECOVIEW PH 3: 18 1	'ype of Action
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Effective date, if other than the difference of the date in the date in the date in this block of the date inserted in this block document's effective date on the Department.	e specific and cannot b k does not meet the	applicable s	of filing or more tatutory filing re	(optic than 90 days after quirements, this	filing.) I	Pursuant to 6 ill not be l	505.0207 (isted as t
ne record specifies a delayed The 90th day after the reco	effective date, b d is filed.	ut not an	effective tim	e, at 12:01 a	ı.m. or	n the ear	rlier of:
Dated	2018						
Cara Whi	charde gnature of a member of	or authorized	representative of:	member			
<u> </u>	e with the interior	amenining	apreciation of c	11461111761			

Page 3 of 3

Filing Fee: \$25.00