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COVER LETTER

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i	NATURAL	PET FOOD TECHNOLOGIE	S LLC	•	
SUBJECT: .	·	Name of Lim	ited Liability Company		_
The enclosed	Articles of a	Amendment and fee(s) are sub	omitted for filing.	RECEI	
Please return	all correspo	ndence concerning this matter	to the following:	2022 MAR -8	PH 12: 09
		MICHAEL BENTLEY		SEC	3 TATE FL
			Name of Person	(1426)	-
		7803 SW ELLIPSE WAY U	Firm/Company UNIT B2	 -	
		STUART FL 34997	Address		
		GARAGEKEPTONLY@GI	City/State and Zip Code MAIL.COM		
		E-mail address: (to be used for future annual repor	t notification)	
For further in MICHAEL B		oncerning this matter, please c	all: 772 888-333	3	
	Name of	Person	at ()	aytime Telephone Nun	hber
Enclosed is a	check for th	e following amount:		!	
□ \$25.00 Fi	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certil Certit	Filing Fee, Teate of Status & Ted Copy . Ted Copy is enclosed
Reg Div P.O	ing Addressistration Sision of Co. Box 632 ahassee, F	Section orporations 7	The Centre	Section Corporations of Tallahassee onroe Street, Suite	e 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NATURAL PET FOOD TECHNOLOGIES LLC (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 and assigned Florida document number L16000001807 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: GARAGE KEPT ONLY LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: 7803 SW ELLIPSE WAY UNIT B2 New Registered Office Address: Enter Florida street address

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.

STUART

K. Beri Shvi Li

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		i		
Title AMBR	Name KETEVAN BERISHVILI	Address 1747 E 3RD STREET APT A8 BROOKLYN NY 11223	Type of Action Add	
			□Remove	
AMBR	MICHAEL BENTLEY	1747 E 3RD STREET APT A8 BROOKLYN NY 11223	nange	
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Page 2 of 3

Adding member Ketevan Berishv	ili		
Changing Michael Bentley's role	from Manager to Member		
Thank you			<u></u>
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ctive date, if other than the dat	e of filing:	(optional) te of filing or more than 90 days after filing.	
e: If the date inserted in this block of	does not meet the applicable	te of filing or more than 90 days after filing, statutory filing requirements, this date) Pursuant to 605.020 will not be listed a
iment's effective date on the Depart	iment of State's records.	'	
ecord specifies a delayed eff ne 90th day after the record		effective time, at 12:01 a.m.	on the earlier
02-02	2022	l	
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Sion	ature of a member or authorized	representative of a member	
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