

L170000034448

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

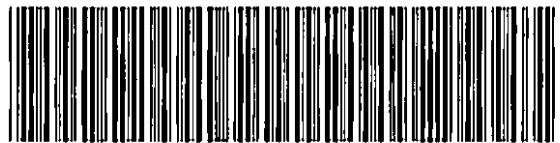
(Business Entity Name)

(Document Number)

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AUG - 9 PM 4:30  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

08/10/18--01002--009 \*25.00

18 AUG - 9 PM 4:16  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

7-16 - 9 2018

08/10/18

SUBJECT: Gourmet Pup Club  
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:

Ansel Dicama  
Name of Person

Gourmet Pup Club  
Firm/Company

14208 Summer Breeze Drive  
Address

Jacksonville, FL 32218  
City/State and Zip Code

apd15e@my.fsu.edu  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dominick J. Ard'is, I at (850) 284-7259  
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

Gourmet Pup Club

(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 02/13/2017 and assigned  
Florida document number L17000034448.

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**)

914 Railroad Avenue, Suite 19  
Tallahassee, FL 32310

Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

914 Railroad Avenue, Suite 19  
Tallahassee, FL 32310

**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:

Dominick Ard'is, I

New Registered Office Address:

914 Railroad Ave, Suite 19

Enter Florida street address

Tallahassee

City

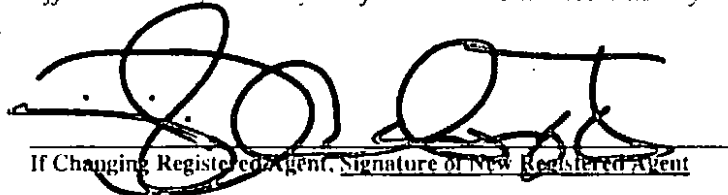
Florida

32310

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.

  
If Changing Registered Agent, Signature of New Registered Agent

Principal

Ansel Diana

14208 Summer Breeze Dr  
Jacksonville, FL 32218

☐ Add

☒ Remove

☐ Change

Registered Agent

Ansel Diana

14208 Summer Breeze Dr  
Jacksonville, FL 32218

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**E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)**

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:  
(b) The 90th day after the record is filed.

Dated \_\_\_\_\_

*Ansel D. Dama*

Signature of a member or authorized representative of a member

Ansel Dama

Typed or printed name of signee

FILED  
2011 AUG -9 PM 4:31  
CLERK OF SUPERIOR COURT  
STATE OF NEW YORK