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N 8 2. I THING

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: DOG ACTIVITY WORLD GROUP, LLC 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:
HANNAH WICKINS Name of Person
DOG ACTIVITY WORLD GROUP, LLC Firm/Company
1510 SW 8TH ST. Address
BOYNTON BEACH, FL 33426 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
HANNAH WICKINIS at (561) 340 3741 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \\$30.00 Filing Fee & Certificate of Status \$\Bigcup \\$55.00 Filing Fee & Certificate of Status \$\Bigcup \\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) 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

Name of the Limited	Liability Company Florida Limited Lial	AS It now appears on oblity Company)	LLC pur records.)	018 DEC	77
The Articles of Organization for this Limited Liab Florida document number	<u> 635</u> .	cre filed on 4/1	1/2017	and assigned 8: 52	
A. If amending name, enter the new name of th	e limited liabilit	y company here:			
The new name must be distinguishable and contain the word	s "Limited Liability	Company," the designa	tion "LLC" or the a	bbreviation "L.L.C."	
Enter new principal offices address, if applicable (Principal office address MUST BE A STREET A	_	1510 SI BOYNTAN 33470	BEACH,	ST. FL	_ _
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1510 SW BOYNTON 33	8TH S 1 BEACH 426	ST. I, FL	
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address here:	e address on our	records, enter	the name of the	new
Name of New Registered Agent: New Registered Office Address:	J.	510 SW 8 Enter Florida str	TH ST.		-
-	BOYNTON	BEACH City	, Florida	33 476 . 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

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>	<u>Name</u>	Address	Type of Action
AMBR	HANNAH WICKINS	GSS LAKESIDE HARROR BOYNTON BEACH, FL 331	□ Add L3 5 □ Remove
			Change
			Add
			☐ Remove
			Change
			Add
			Remove
			Change
			O Add
			□ Remove
			Change
			Remove
			D Change
·			□ Add
			Remove
			Change

. If amending any other information, enter change(s) here: (Attach additional sheets, if neces	ssary.)	
	. <u>-</u> .	
		
		
		
		
		
		_
		
		
. Effective date, if other than the date of filing: (option	nol)	
(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 finds. If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	iling.) Pursuant to	605.0207 (3) listed as the
the record specifies a delayed effective date, but not an effective time, at 12:01 a.) The 90th day after the record is filed.	m. on the ea	arlier of:
Dated 12/12/ 2018	J. S.	7018 DEC
Namahhideis	:.r::: -	- (25,542)
Signature of a member or authorized representative of a member	(7)	
HA-NNAH WICKINS Typed or printed name of signee	tu ^{cv}	
typed or printed name of signee		5

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Filing Fee: \$25.00