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(Red	questor's Name)	
(Add	dress)	
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(City	y/State/Zip/Phone	e#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	

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COVER LETTER

Maya Be	ean LLC
SUBJECT:	Name of Limited Liability Company
The enclosed Articles	of Amendment and fee(s) are submitted for filing.
Please return all corres	spondence concerning this matter to the following:
	Prentiss Lawson
	Name of Person
	Maya Bean LLC
	Firm/Company
	2833 Hunt Club Ln
	Address
	Orlando Florida 32826
	City/State and Zip Code
•	prentiss.lawson.pal@gmail.com E-mail address: (to be used for future annual report notification)
Ear further information	n concerning this matter, please call:
Prentiss Lawson	321 9471420 at ()
Name	e of Person Area Code Daytime Telephone Number
Enclosed is a check for	r the following amount:
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
MAI	ILING ADDRESS: STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Maya Bean LLC		
(Name of the Limited Liability Company as it now ap (A Florida Limited Liability Compa	pears on our records. ny)	
The Articles of Organization for this Limited Liability Company were filed or Florida document number		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability compan	y here:	
Top Dog Marketing LLC		
The new name must be distinguishable and contain the words "Limited Liability Company,"	the designation "LLC" or the abbrev	viation "L.L.C."
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)		· 📆
	···	· 65
		. 20 %
B. If amending the registered agent and/or registered office address	s on our records, <u>enter Élè</u>	namerof the n
registered agent and/or the new registered office address here:	[***]	
		Section
Name of New Registered Agent:	7.5	45-
New Products of Office Address.	<u> </u>	9
New Registered Office Address: Enter	r Florida street address	
	Planida	
City	, Florida	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
CEO	Prentiss A. Lawson IV	2833 Hunt Club Ln Orlando Florid:	■ Add
			Remove
			Change
			Add
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			□ Remove
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			Remove
			Change
			□ Remove
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Top Dog Marketing LLC by	filling out this amendment for	m.		
				
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Tective date, if other than the an effective date is listed, the date mu	date of filing:	data of fling or more than	(optional)	a 605 02
ote: If the date inserted in this b	lock does not meet the applicat	ole statutory filing requir	rements, this date will not be	e listed a
ocument's effective date on the I	Department of State's records.			
e record specifies a delaye	d offoative data but not	an offective time	st 12:01 a.m. on the e	arlior
The 90th day after the re		an enecuve time, e	it 12.01 a.m. on the c	.orner
ated May 29,	2018	_· .		
	prentiss	laurann	e e	
	//			
	Signature of a member or author	ized representative of a me	mber	

Page 3 of 3

Filing Fee: \$25.00