L18000114399

(Requestor's Name)				
(Address)				
(Addi	ess)			
(City/	State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificate	s of Status		
Special Instructions to Filing Officer:				
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Office Use Only



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COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT: DOGS COME	FIRST LLC				
	Name of Limited Liability Company				
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Office Char	nge and fee(s) are submitted for filing.				
Please return all correspondence concerning this matte	r to the following:				
JANET ACKERMAN Name of Person NATURE'S WAY FARM					
Firm/Company 20950 SW 177 AVE Address					
MIAMIFE 33187 City/State and Zip Code					
Jackermane nature Sway n E-mail address: (to be used for future annual repo	niami, Comort notification)				
For further information concerning this matter, please	call:				
Name of Person	305, 251-6521 EXT 213 Area Code & Daytime Telephone Number				
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street. Suite 810 Tallahassee, FL 32303				
Enclosed is a check for the following amount:					
S25 Filing Fee	☐ \$55 Filing Fee & Certified Copy				
INHS18 (2/14)					



December 11, 2020

JANET ACKERMAN NATURE'S WAY NURSERY 20950 SW 177 AVENUE MIAMI, FL 33187

SUBJECT: DOGS COME FIRST, LLC

Ref. Number: L18000114399

We have received your document for DOGS COME FIRST, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 820A00025015

Irene Albritton Regulatory Specialist II

www.sunbiz.org

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY .

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

I. Na	me of the limited liability company:	COME FIRST	- LLC.		
2. (a)		(b)			
()	Principal office address of limited liability company:	Mailing address of	f limited liability company:		
	(Note: MUST BE STREET ADDRESS)	PO BOX 9	E POST OFFICE BOX)		
	20950 SW 177 AVE				
	MIAMI, FL 33187	MIAMI FL	_33197		
	5/10/18	L1800011	1-399		
3.	Date of filing/registration in Florida	4. Document nur	nber		
5. (a)					
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:					
	PETER REINERT				
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)			
	215 E EOLA DR_		•		
	OPLANDO FL	32001	- <u>-</u>		
			-		
(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office address:			
	PETER REINERT		高 五 高		
	NEW Registered Office Address:		-		
	20950 SW 177 AVE		·*;		
	MIAMI	33187			
change agent v	mited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lial are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	registered office and the business oblity company, it is hereby confir fithe limited liability company or a imited liability company.	office of the registered med that the change(s) as otherwise provided in		
		DAWNWIL			
•	ure of a member or authorized representative of a member	Printed or typed	-		
I here provisi the obt to mer notified	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pigations of my position as registered agent as provided by reflect a change in the registered office address. I have time the property of the change of this change.	re to act in this capacity. I further performance of my duties, and I an for in Chapter 605, F.S. Or, if th ereby confirm that the limited liab	agree to comply with the n familiar with and accept is document is being filed willy company has been		
Signatu	re of Registered Agent				