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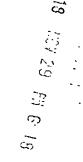
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COVER LETTER

Division of Corporations
SUBJECT: Precious Angels Dog Grooming, 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:
Jeremy D. Teague Name of Person
Firm/Company
4830 mississippi CT
Jax FL 32209 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Jeremy P. Teague at (901) 801-6300 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Status Solution Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) \$25.00 Filing Fee Certified Copy (additional copy is enclosed) \$25.00 Filing Fee Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section

TO:

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

Precious Angel (Name of the Himited	Liability Company as it now appears on our records. A Florida Limited Liability Company)	
The Articles of Organization for this Limited Liab	bility Company were filed on $\frac{10 11 30 }{100}$	and assigned
This amendment is submitted to amend the follow		5.2 (85)
A. If amending name, enter the new name of t	he limited liability company here:	න [2
The new name must be distinguishable and contain the wor Enter new principal offices address, if applicable (Principal office address MUST BE A STREET)	ble:	or the abbreviation "L.L.C."
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE Bo	<u>OX)</u>	
B. If amending the registered agent and/or registered agent and/or the new registered officers.		enter the name of the new
Name of New Registered Agent:	Jeremy D. Teague	<u> </u>
New Registered Office Address:	4830 Mississippi CT Enter Florida street address	
	Jacksonille, Flor	rida 32209 Zip Cixde

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
MGR	Jeremy D. Teagre	4830 mississippi CT	
		Jacksonville, FL 32209	Remove
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Effective date, if other than the dat (If an effective date is listed, the date must be	specific and cannot be prior to	o date of filing or more than 90 c	_ (optional) lays after filing.) Pursuant to 605.02
Note: If the date inserted in this block	does not meet the applical	ble statutory filing requirem	ents, this date will not be listed
document's effective date on the Depar	tment of State's records.		
the record specifies a delayed ef) The 90th day after the record		an effective time, at 1	.2:01 a.m. on the earlier
) The 90th day after the record	is med.		
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Filing Fee: \$25.00