

L18000286511

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

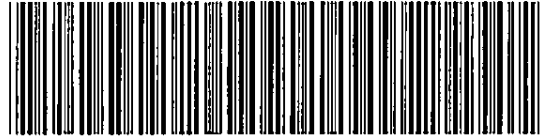
(Business Entity Name)

(Document Number)

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12/27/23--01036--004 \*\*25.00

2023 DEC 27 AM 11:15

# COVER LETTER

TO: Registration Section  
Division of Corporations

change of business name for DOGS TAIL GROOMING FOR THE PAMPERED PET LLC

SUBJECT: \_\_\_\_\_  
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:

Jonathan PLUMMER

\_\_\_\_\_  
Name of Person

DOGS TAIL GROOMING FOR THE PAMPERED PET LLC

\_\_\_\_\_  
Firm/Company

2542 North Federal HWY

\_\_\_\_\_  
Address

FORT LAUDERDALE, FLORIDA, 33305

\_\_\_\_\_  
City/State and Zip Code

jonathanplummer@hotmail.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jonathan PLUMMER

954 563 3649

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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FILED





**D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)**  
Have to change the business name because the spelling was wrong from the previous owner:

from DOGS TAIL GROOMING FOR PAMPERED PET LLC (current business name)

to A DOG'S TALES GROOMING FOR THE PAMPERED PET LLC (new business name)

I also would like to add my partner LOIC HOCHSTRASSER as Manager

Thank you for making these changes for our Business

We already paid the \$25 filling fees (copy of the check attached to this document)

2023 DEC 27 AM 11:15

NA

**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 605.02  
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed  
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  
record is filed.

January 30th, 2024  
Dated \_\_\_\_\_



Signature of a member or authorized representative of a member

Jonathan PLUMMER

Typed or printed name of signee