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| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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COVER LETTER

| TO: | Registration S Division of Co | | | |
|---------------|----------------------------------|--|---|--|
| cub ir | Urban Tail | z Retreat LLC Correction | | |
| SUBJE | CI: | Name of Limi | ted Liability Company | |
| The enc | losed Articles of | Amendment and fee(s) are subr | nitted for filing. | |
| Please r | eturn all corresp | ondence concerning this matter t | o the following: | |
| | | Heidi L Albury | | |
| | | Urban Tailz Retreat | Name of Person | |
| | | III6 W Fig St | Firm/Company | |
| | | Tampa, FL 33606 | Address | |
| | | Heidi@urbantailz.pet | City/State and Zip Code | |
| | | E-mail address: (t | o be used for future annual report n | otification) |
| For furt | her information | concerning this matter, please ca | II: | |
| Heidi L | Albury | | 813 2583647 | |
| | Name | of Person | Area Code Days | time Telephone Number |
| Enclose | d 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/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 Lim | ited Liability Company as (A Florida Limited Liability) | it now appears on our records.) y Company) | |
|---|--|--|--|
| The Articles of Organization for this Limited I | Liability Company were | filed on 3/15/2019 | and assigned |
| This amendment is submitted to amend the fol | lowing: | | |
| A. If amending name, enter the new name | of the limited liability o | ompany here: | |
| The new name must be distinguishable and contain the | words "Limited Liability Co | mpany," the designation "LLC" or the | ne abbreviation "L.L.C." |
| Enter new principal offices address, if appli | cable: | | 은땅 |
| (Principal office address MUST BE A STRE | ET ADDRESS) | | 11111111111111111111111111111111111111 |
| Enter new mailing address, if applicable: | | | S PH & |
| Mailing address MAY BE A POST OFFICE | E BOX) | | 5 5 8 |
| B. If amending the registered agent and registered agent and/or the new registered of | _ | address on our records, <u>en</u> | ter the name of th |
| Name of New Registered Agent: | Heidi L Albury | | |
| New Registered Office Address: | 1116 W Fig St | | |
| | | Enter Florida street address | |
| | Tampa | , Florida | 33606 |
| | (| Žity | Zip Code |

New Registered Agent's Signature, if changing Registered Agent:

Linham Taile Batmant LLC

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> | Name | <u>Address</u> | Type of Action |
|--------------|-----------------|-------------------------------------|----------------|
| AMBR | Jack S Hamilton | 3409 W Lemon St, Tampa, Fl 33609 | |
| | | | Remove |
| | | | Change |
| MGR | Heidi L Albury | 1116 W Fig St Tampa, FL 33606 | Add |
| | | | □ Remove |
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| an effec | ctive date is listed, t | he date must be: | specific and | annot be prio | | | | r filing.) Pursu | |
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Typed or printed name of signee

Filing Fee: \$25.00