

LI9000100721

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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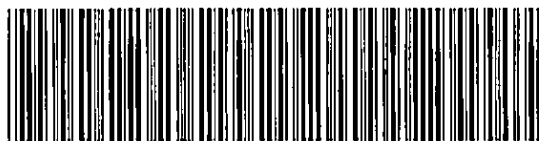
(Business Entity Name)

(Document Number)

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19 JUN 18 AM 8:53

D SCOTT

JUN 18 2019

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: 3D PAW 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:

Justin Robson  
Name of Person  
3D PAW LLC  
Firm/Company  
1141 Paper Fig Ct  
Address  
Sarasota FL 33957  
City/State and Zip Code  
Justin@3dpaw.com  
E-mail address: (to be used for future annual report notification)

2018 JUN 18 A 1:25

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For further information concerning this matter, please call:

Spencer Nowell at (239) 222-3793  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |  |  |  |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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**

3D PAW LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 4/11/19 and assigned  
Florida document number 4/11/19.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

1141 Paper Fig CT  
Sanibel, FL 33957

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

112 Edwards St  
Tallahassee, FL  
32304

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

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>	<u>Address</u>	<u>Type of Action</u>
MGR	Justin Robson	112 Edwards St	<input checked="" type="checkbox"/> Add
		Tallahassee FL 32304	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Spencer Nowell	1141 Paper Fig Ct	<input checked="" type="checkbox"/> Add
		Sanibel, FL 33957	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

FILED

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Spencer Nowell and Justin Robson  
are both managing partners  
retaining 50% equity each

Mailing address for business  
is changed to 112 Edwards St  
Tallahassee, FL  
32304

Principal address remains the same  
1141 Paper Fig Ct  
Sanibel, FL  
33956

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 605.0207 (3)(b)

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

Dated June 17, 2019

Spencer Nowell  
Signature of a member or authorized representative of a member

Spencer Nowell  
Typed or printed name of signee