L 200000 35 625

(Re	equestor's Name)	
(110	,questor a riume)	
	Idress)	
(Au	iuless)	
(Ad	idress)	
(Cit	ty/State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



300340897373

02,120/20--01002--017 *+60.00

2020 APR - 7 PM 1: 07
SECRETARY OF STATE

APR 08 2020

COVER LETTER

wag's & walk'n 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: christine biddle-schado Name of Person Firm/Company 1860 barrington circle Address rockledge fl 32955 City/State and Zip Code ichiddle@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: christine biddle-schado Daytime Telephone Number Name of Person Enclosed is a check for the following amount: \$60.00 Filing Fee, S25.00 Filing Fee ☐ \$30.00 Filing Fee & □ \$55.00 Filing Fee & Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed)

Mailing Address:

TO:

Registration Section **Division of Corporations**

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our recor nability Company)	<u>ds.</u>)
The Articles of Organization for this Limited Liability Company	were filed on 1-29-2020	and assigned
Plorida document number <u>120000035625</u> .		
his amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited liab</u>	ility company here:	
wag'n & walk'n / LC		
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "I.I.	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
• •	***	282 ≥ SE
Principal office address MUST BE A STREET ADDRESS)		<u> </u>
		S I
		SER 7
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		- 52 - `
		<u> </u>
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>ente</u>	r the name of the new reg
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addre	522
		lorida
	City	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

Title	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□Change
			🗆 Remove
			2021 APR - J
		 .	PR - Had DAHASSEE
			PRODUCTION OF THE PROPERTY OF
			□ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			☐ Change
			□Add
			□Remove
			□Change

			_
			-
			_
			-
			_
			_
			-
			_
			_
			_
		7A. S	
			-
		AS. 70	•
		Shirt 7	_!
		77 PR	! -!
		I: 0) STATE LORID	_
		, -	
		· · · · · · · · · · · · · · · · · · ·	_
ctive date, if other than the	date of filing:	(optional)	
effective date is listed, the date mus	t be specific and cannot be prior to date of filing or sock does not meet the applicable statutory fili	more than 90 days after filing.) Pursuant to 60)5,020 sted a
iment's effective date on the D	epartment of State's records.		
	Province Alexander 12.01 minutes	on the earlier of the The Oath day of	or th
ford specifies a delayed effectively.	e date, but not an effective time, at 12:01 a.m	i, on the earner of. (b) The 9our day are	Ci tii
7 17 2020	2020		
2-17-2020 ed	. 2020		
A. +R	Signature of a member or authorized representative		