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Special Instructions to	Filing Officer:	

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COVER LETTER

og Training, LLC		
Name of Limi	ted Liability Company	
Amendment and fee(s) are sub-	mitted for filing.	
ndence concerning this matter	to the following:	
Jacqueline Quiroga		
110.7	Name of Person	
ZenBusiness INC		
	Firm/Company	
5511 Parkcrest Drive STE	103	
	Address	
Austin, Texas, 78731		
	City/State and Zip Code	
		ufication)
		me Telephone Number
f Person	Area Code Daytii	me Telephone Number
he following amount:		
☐ \$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)
	Street Address: Registration S	ection
Corporations	Division of Co	orporations
27 FL 32314		Tallahassee oe Street, Suite 810
	Amendment and fee(s) are subrandence concerning this matter to Jacqueline Quiroga ZenBusiness INC 5511 Parkcrest Drive STE Austin, Texas, 78731 fulfillment@zenbusiness.co E-mail address: (i) oncerning this matter, please co ZenBusiness INC of Person he following amount: S30.00 Filing Fee & Certificate of Status Section Corporations 27	Name of Limited Liability Company Amendment and fee(s) are submitted for filing. Indence concerning this matter to the following: Jacqueline Quiroga

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Top Gun Dog Training, LLC	
(<u>Name of the Limited Liability Company as it now appears on our records.</u>) (A Florida Limited Liability Company)	
The Articles of Organization for this Limited Liability Company were filed on 62/06/2020 Florida document number 1.20000014480	and assigned
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 above the company of the designation (LLC) and the contain the words "Limited Liability Company."	obreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address on our records, enter the nan agent and/or the new registered office address here:	ne of the new registered
	202
Name of New Registered Agent:	
New Registered Office Address: Enter Florida street address	
Florida	Zip Cpde
New Registered Agent's Signature, if changing Registered Agent:	다. - 다. 구

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 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	Address	Type of Action
AMBR	Stewart Buchanan	1925 Hillside Dr.	□Add
		Falls Church, VA 22043	
			□Change
v			□Add
			Remove
			□Change
			□Add
			□Remove
			Change
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ecord specifies a delayed effective date is filed.	e, but not an effe	ective time.	. at 12:01 a.m	on the earlier	of: (b) Th	e 90th day aft	er the
October 25th	. 202	<u> </u>					
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