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COVER LETTER

TO:

	legistration Solivision of Col			
SUBJECT	Elite Florid	da Canine College, LLC		
SUBJECT	·	Name of Lim	nited Liability Company	
The enclos	sed Articles of	Amendment and fee(s) are sub	omitted for filing	
		ondence concerning this matter	· ·	
		Tara L Wekstein		
			Name of Person	
			Firm/Company	
		295 Bourdeaux Dr SW		
			Address	
		Vero Beach, FL 32968		
			City/State and Zip Code	
		tara.wekstein@gmail.com		
		E-mail address: (to be used for future annual report noti	fication)
For further	information c	oncerning this matter, please c	all:	
Tara L Wo	ekstein		772 404-1946 at ()	
	Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is	s a check for th	ne 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)
	ailing Addres egistration S		Street Address:	ation
	ivision of C		Registration Sec Division of Cor	
	O. Box 632	•	The Centre of T	•
Ta	allahassee, F	FL 32314		e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Elite Florida Canine College, LLC					
(Name of the Limit	ed Liability Company (A Florida Limited Lia	as it now appears on obility Company)	our records.)		
The Articles of Organization for this Limited L Florida document number L20000074512	iability Company w	ere filed on March (5, 2020	and assigne	:d
This amendment is submitted to amend the following	owing:				
A. If amending name, enter the new name o	f the limited liabili	ty company here:			
The new name must be distinguishable and contain the v	vords "Limited Liability	Company," the design	ation "LLC" or the abb	previation "L.L.C."	
Enter new principal offices address, if applic	able:				
(Principal office address MUST BE A STREE	T ADDRESS)				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) B. If amending the registered agent and/or agent and/or the new registered office address.	egistered office ad	dress on our recor	ds, <u>enter the nam</u> e	SECRETARY OF STALLAHASSEE, THE	T T C gistere
Name of New Registered Agent: New Registered Office Address:	Tara L Wekstein	Bow ckaux Enter Florida s.	Dr SW		
	Vero	Reach	, Florida	32968 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>	Name	Address	Type of Action
MGR	Tara L Wekstein	295 Bourdeaux Dr SW, Vero Beach FL 32968	DAdd
			🗏 Remove
			□Change
			🗆 Add
			□ Remove
			□Change
			🗆 Add
			□Remove
			□Change
			🗆 Add
	Tara L Wekstein		□Remove
			□Change
			□Add
			□Remove
.			□Add
			□Remove
			□Change

		. <u>.</u>				
						
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Effective date, if other than the lf an effective date is listed, the date me Note: If the date inserted in this be	ist be specific and cannot lock does not meet the	be prior to date o e applicable stat	f filing or more than	90 days after filin	e.) Pursuant to 605.02	07 (as t
document's effective date on the I	Department of State's 1	records,				
e record specifies a delayed effecti rd is filed,	ve date, but not an effe	ective time, at I	2:01 a.m. on the e	arlier of: (b) T	he 90th day after th	.e
Dated August 15	2022	2 .				
		\ \		_		
	Signature of a member	or authorized eve	resentative of a	mhor		
	organist or a memori	or againstized (C)	resemblife of a fife	moci		
Tara L Wekstein						

Filing Fee: \$25.00