

L20000 116 491

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

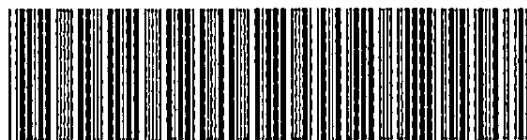
(Business Entity Name)

(Document Number)

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06/08/20--01010--008 \*\*25.00

FILED  
2020 JUN -8 AM 8:48

Amend

JUN 25 2020

I ALBRITTON

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Groomr 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:

Elijah Thieret  
Name of Person

Firm/Company

6202 Vista Del Mar #251  
Address

Playa Del Rey, CA 90293  
City/State and Zip Code

elijah@groomr.com  
E-mail address: (to be used for future annual report notification)

further information concerning this matter, please call:

Elijah Thieret at (323) 393-5508  
Name of Person Area Code Daytime Telephone Number

used is a check for the following amount:

- |                  |  |  |  |
|------------------|--|--|--|
| 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 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**

GROOMER 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 4/29/2020 and assigned Florida document number 120000116491.

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 "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**

**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

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

I 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 understand the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is submitted 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


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>
<u>MGR</u>	<u>Danielle Thieret</u>	<u>6267 Vista Del mar</u>	<input type="checkbox"/> Add
		<u>#251</u>	<input checked="" type="checkbox"/> Remove
		<u>Playa Del Rey, CA 90293</u>	<input type="checkbox"/> Change
<u>MGR</u>	<u>Elijah Thieret</u>	<u>6200 Vista Del mar #251</u>	<input checked="" type="checkbox"/> Add
		<u>Playa Del Rey, CA</u>	<input type="checkbox"/> Remove
		<u>90293</u>	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change


**Effective Date:** 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.

6/2/2020



Signature of a member or authorized representative of a member

Daniel Thieret



Eujan Thieret

Typed or printed name of signer