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Special Instructions to	Filing Officer:	
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Office Use Only

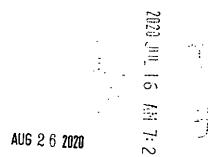


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S. YOUNG

COVER LETTER

TO: Registration Se Division of Con			with the second
	FOR SALE LLC		
SUBJECT:	Name of Lin	nted Liability Company	
The enclosed Articles of	Amendment and feets) are sub	omitted for filing.	
Please return all correspondence	ondence concerning this matter	to the following:	
	LEONEL PACHECO CA	RMENATES	
		Name of Person	
	DOGGIES FOR SALE LI	.C	
		Firm/Company	
	8981 SW 40TH STREET		
		Address	
	MIAMI, FL. 33165		
	***************************************	City/State and Zip Code	
	MILTONSANCHEZ25@Y		
For further information of	t-mail address: (concerning this matter, please c	to be used for future annual report not all:	itication)
MARVIN CORRALES		305 794-5327	
Name o	of Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for t	he 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)
<u>Mailing Addre</u> Registration		<u>Street Address:</u> Registration Se	ection
Division of C		Division of Co.	
P.O. Box 632		The Centre of	
Tallahassee.	r), 52514	2415 N. Monro	e Street, Suite 810

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

DOGGIES FOR SALE 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 Co	ompany were filed on 06/01/2020	and assigned
Florida document number L20000148965		
	 `	
This amendment is submitted to amend the following:		, Q
A. If amending name, enter the new name of the limit	ted liability company here:	16 14 7:22
The new name must be distinguishable and contain the words "Limit	ted Liability Company." the designation	c"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	, , , , ,	
(Principal office address MUST BE A STREET ADDR	F7/7/1	
Trincipia office address 51051 DLA STREET ADDA		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
The state of the s		
		
B. If amending the registered agent and/or registered	office address on our records, g	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
		. Florida
	Chy	Florida Zip Code
New Registered Agent's Signature, if changing Registered	Agent:	
I hereby accept the appointment as registered agent a prayisions of all statutes relative to the proper and co	· · · · · · · · · · · · · · · · · · ·	

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. Thereby 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>	Address	Type of Action
AMBR	SEGUNDO M. PACHECO T	10341 SW 208 LN, CUTLER BAY, FL. 33189	= Add
			□Remove
			□Change
AMBR	MANUEL PACHECO TOLEDO	10341 SW 208 LN, CUTLER BAY, FL. 33189	🗆 Add
			■Remove
			□Change
			□Add
		-	□Remove
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	<u> </u>		□Add
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			□ Changa

	
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ffective (date, if other than the date of filing: (optional)
an effectiv	e 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 to date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
	s effective date on the Department of State's records.
	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
l is filed.	
06/	20/2020
ated	
	· Alanda -
	(Signature of a member or authorized representative of a member
	LEONEL PACHECO CARMENATES
	Lyped or printed name of signee

Filing Fee: \$25.00