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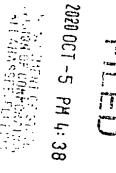
(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

porations		
GS LLC	•	
Name of Limi	ited Liability Company	
Amendment and fee(s) are sub-	mitted for filing.	
ndence concerning this matter	to the following:	
HEIDI DILLARD		
	Name of Person	
DUNE DOGS LLC		
	Firm/Company	
633 BOARS HEAD DRIV	Е	
	Address	
PORT ORANGE FL 3212	7	
	City/State and Zip Code	
		ication)
	·	· · · · · · · · · · · · · · · · · · ·
	307 763-3312 at ()	
Person		Telephone Number
e 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)
	Amendment and fee(s) are sub- ndence concerning this matter HEIDI DILLARD DUNE DOGS LLC 633 BOARS HEAD DRIV PORT ORANGE FL 3212 DUNEDOGSLLC@GMAIL E-mail address: (i) concerning this matter, please can be following amount: ### \$30.00 Filing Fee &	Name of Limited Liability Company Amendment and fee(s) are submitted for filing. Indence concerning this matter to the following: HEIDI DILLARD Name of Person DUNE DOGS LLC Firmt/Company 633 BOARS HEAD DRIVE Address PORT ORANGE FL 32127 City/State and Zip Code DUNEDOGSLLC@GMAIL.COM E-mail address: (to be used for future annual report notification oncerning this matter, please call: at (307 763-3312 at (Area Code Daytime) Ferson The following amount: \$\Begin{array} \text{ \$30.00 Filing Fee & Certified Copy} \end{array}

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

7970

DUNE DOGS LLC	
(Name of the Limited Liability Compa (A Florida Limited)	
he Articles of Organization for this Limited Liability Company	were filed on JUNE 16, 2020 and assigned
Florida document number L2(XXX)166361	550 5
This amendment is submitted to amend the following:	38
A. If amending name, enter the new name of the limited liab	ility company here:
ME & PAW LLC	
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	875 TWISTED PINE DRIVE
Principal office address MUST BE A STREET ADDRESS)	NEW SMYRNA BEACH FL 32168
Enter new mailing address, if applicable:	875 TWISTED PINE DRIVE
Mailing address MAY BE A POST OFFICE BOX)	NEW SMYRNA BEACH FL 32168
3. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the name of the new reg</u> istere
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	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

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
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			□Remove
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			□Change
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			□Remove
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	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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lf an cfl <u>Note:</u>	october 1, 2020 (optional) ective date, if other than the date of filing: the 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 (and the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ent's effective date on the Department of State's records.
e recor rd is fi	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the led.
Dated	SEPTEMBER 30 2020
izaicu	1 July Duland
	Signature of a member or authorized representative of a member