

## L20000383146

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## **COVER LETTER**

TO: Registration S Division of Co		•			
The Dogh	ouse and Soda Fountain, LLC	•			
SUBJECT: Name of Limited Liability Company					
The enclosed Articles of	f Amendment and fec(s) are sub	mitted for filing.			
Please return all corresp	oundence concerning this matter	to the following:			
	Carlos A Aguilera				
		Name of Person			
The Doghouse and Soda Fountain, LLC					
Firm/Company					
	4722 East Michigan St.				
		Address			
	Orlando, FL. 32812				
	aguilerafusco@outlook.con	City/State and Zip Code	2463		
		to be used for future annual report notification)			
For further information	concerning this matter, please e	all:	(i) (ii)		
Carlos A Aguilera		610 732-7971 at ( )	 نې		
Name	of Person	Area Code Daytime Telephone	Number		
Enclosed is a check for	the following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy Cadditional copy is enclosed) C	50.00 Filing Fee, Certificate of Status & Certified Copy additional copy is enclosed)		
Mailing Addre Registration Division of P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address: Registration Section Division of Corporations The Centre of Tallahasse 2415 N. Monroe Street, S Tallahassee, FL 32303	e		

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Doghouse and Soda Fountain, 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  $\frac{12/08/2020}{12/08/2020}$ and assigned Florida document number L20000383146 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) B. 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

## 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.

City

If Changing Registered Agent, Signature of New Registered Agent

\_, Florida \_\_\_

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	Joyce Delgado	2923 Conover Avc.	<b>=</b> Add
		Orlando, Florida 32812	Remove
			□Change
<del></del>			□Add
			🗀 Remove
			Change
	<del> </del>		□ Add
			□Remove
			□Remove
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			□Change
	<del></del>		□Add
			□Remove
			□ Change

Typed or printed name of signee