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2021-03-16 08:32:50 PDT

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From: Svivia Pauli

**Division of Corporations** 



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(((H210000970793)))



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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **DELRAY DOG COMPANY LLC**

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Estimated Charge	\$55.00		

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March 11, 2021

FLORIDA DEPARTMENT OF STATE Division of Corporations

DELRAY DOG COMPANY LLC 450 KNIGHTS RUN AVE., #413 TAMPA, FL 33602US

SUBJECT: DELRAY DOG COMPANY LLC

REF: L21000030059

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Darlene Connell FAX Aud. #: H21000097079

Regulatory Specialist II Supervisor Letter Number: 221A00005213

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2021-03-16 08:32:50 PDT

LegalZoom.com. Inc.

From: Svivia Paull

## **COVER LETTER**

	Registration Sc Division of Cor			
SERIEC	T:	DOG COMPANY LLC		
усторе	**	Name of Limit	ted Liability Company	
The enclo	sed Articles of	Amendment and fee(s) are subm	nitted for filing.	
Please ret	urn all correspo	ondence concerning this matter t	o the following:	
		Cheyenne Moseley		
			Name of Person	<del></del> _
		Legalzoom.com, Inc.		
			Firm/Company	
		101 N Brand Blvd 11th Fl		
			Address	<del></del>
		Glendale, CA 91203		
			City/State and Zip Code	
		stephen@delraydog.co	be used for future annual report noti	(figurism)
For furthe	r information c	oncerning this matter, please cal	·	neadony
		oncerning this matter, preuse ca		
Cheyenne	2 Moseley	l'Person	at () Area Code Daytim	ne Telephone Number
	Name o	i Person	Area Code Daytim	ie Telephone Number
Enclosed	is a check for th	ne following amount:		
□ \$25.0	0 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

P.O. Box 6327

To: 18506176380

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DELRAY DOG COMPANY LLC  (Name of the Limited Liability Compa	inv as it now appears on our records.)	<del></del>
(Name of the Limited Liability Compa (A Florida Limited	Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 01/13/2021	and assigned
Florida document number 1.21000030059		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	fity Company," the designation "LLC" or the abbre-	iation "L.L.C."
Enter new principal offices address, if applicable:	7495 W Atlantic Ave. Suite #200 - Pmb 306	
(Principal office address MUST BE A STREET ADDRESS)	Delray Beach, FL 33446	
Enter new mailing address, if applicable:	7495 W Atlantic Ave, Suite #200 - Pmb 306	
(Mailing address MAY BE A POST OFFICE BOX)	Delray Beach, FL 33446	
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her		e name of the
Name of New Registered Agent:	<u> </u>	
New Registered Office Address:		
	Enter Florida street address	2
	Florida	Zip Còcle
New Registered Agent's Signature, if changing Registered Agent:		Zip Code -5
- I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete		

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

To: 18506176380

<u>Title</u>	Name	Address	Type of Action
MGR	HOWARD MOORE	450 KNIGHTS RUN AVE, #413	Add
		TAMPA, FL 33602	Remove
			Change
MGR HONG HUANG	HONG HUANG	450 KNIGHTS RUN AVE, #413	
		TAMPA, FL 33602	■ Remove
			Change
MGR	BO SUN	450 KNIGHTS RUN AVE, #413	
		TAMPA. FL 33602	■ Remove
			Change
AMBR	Howard Ratner	7495 W Atlantic Ave, Suite #200	B Add
		Pmb 306	☐ Remove
		Delray Beach FL 33446	☐ Change
	<del></del>		
			Remove
			☐ Change
	<del></del>		
			Remove
			□ Change

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Note:	ive date, if other than the date of filing:  (optional)  focuse 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 605,020  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a tent's effective date on the Department of State's records.
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
)ated	March 3 / 12021
	Signature of a member or authorized representative of a member

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Filing Fee: \$25.00