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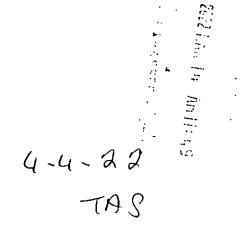
(Requestor's Name)
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(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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COVER LETTER

ction porations		
SCOOPY I	DOO DUTY LLC	•
Name of Lim	ited Liability Company	<u> </u>
Amendment and fee(s) are sub	mitted for filing.	
indence concerning this matter	to the following:	
LOVETTE DOBSON		
	Name of Person	
	Firm/Company	
17350 STATE HWY 249,	#220	
	Address	
HOUSTON, TX 77064		
Firm/Company 17350 STATE HWY 249, #220 Address HOUSTON, TX 77064 City/State and Zip Code EFILE1234@INCFILE.COM E-mail address: (to be used for future annual report notification) nation concerning this matter, please call: SON at (
		ntification)
oncerning this matter, please c	all:	
	_	453
f Person		me Telephone Number
ne 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)
	Street Address: Registration S	ection
orporations	Division of Co	orporations
		Tallahassee oe Street, Suite 810
	Amendment and fee(s) are substituted and fee(s)	SCOOPY DOO DUTY LLC Name of Limited Liability Company Amendment and fee(s) are submitted for filing, indence concerning this matter to the following: LOVETTE DOBSON Name of Person

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SCOOPY DOO DU		
(<u>Name of the Limited Liability Company a</u> (A Florida Limited Liab	s it now appears on our records.) ility Company)	
The Articles of Organization for this Limited Liability Company we Florida document number $\frac{1.21000122041}{1.000122041}$.	re filed on 03/15/2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability	company here:	
Poopy Proof Solutions LLC		
The new name must be distinguishable and contain the words "Limited Liability C	Company," the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		52
		*
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		- B
	74+- +	iii Ço
B. If amending the registered agent and/or registered office add agent and/or the new registered office address here:	ress on our records, enter th	ie name of the new regist
Name of New Registered Agent:		***************************************
New Registered Office Address:		
	Enter Florida street address	
	Flor	ida
	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>	Name	Address	Type of Action
			□Add
			□Remove
			Change
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Tective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be pote: If the date inserted in this block does not meet the apportment's effective date on the Department of State's reco	plicable statutory	g or more than 90 day filing requiremen	ر (optional)	uant to 605
section 5 thether date on the Separation of State 5 feet	143.			
e record specifies a delayed effective date, but not an effective date. but not an effective distilled.	ve time, at 12:01	a.m. on the earlier	of: (b) The 90t	h day after t
Dated March, 07 2022	·			
Signature of a member or a	re Ka	Vi)		

Filing Fee: \$25.00