121000231991

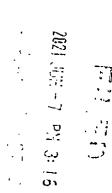
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



000366894950

08/07/21--01095--011 ++25.00



M21

COVER LETTER

TO:	Registration Section Division of Corporations		
SHRII	ECT: CAT DOG PET SHOT, LLC		
(91)1341	ECT: <u>CAT DOG VET SHOT LLC</u> Name of Limited Liability Company		
The en	nclosed Articles of Amendment and fee(s) are submitted for filing.		
Please	return all correspondence concerning this matter to the following:		
	CESAR F SOCAS LA BELLA Name of Person		
	CAT DOG PET SHOT, U.C.	2621 J	
	8140 NW 74 Av BAY 16		
	MEDLEY, FL 33166 City/State and Zip Code		
	MEDLEY, FL 33166 City/State and Zip Code Cat Love Low annual com E-mail address: (to be used for future annual report notification)	Q1	
For fur	ther information concerning this matter, please call:		
<u>C</u> E	SAR F SCCAS LA BELLA at (407) 237.9054 Name of Person Area Code Daytime Telephone Number		
Enclose	red is a check for the following amount:		
∖ ¥(\$2:	(additional copy is enclosed) Certified	e of Status &	+
	Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee		
	Tallahassee, FL 32314 Tallahassee, FL 32314 Tallahassee, FL 32303	10	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CAT DOG PET SHO (Name of the Limited Liability C (A Florida Lin	ompany as it now appears on nited Liability Company)	our records.)		
The Articles of Organization for this Limited Liability Completion of Complete Laboration o	pany were filed on _ <i>05</i> 4	119/2021	_ and assigned	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited	liability company here:			
CAT DOG PET S The new name must be distinguishable and contain the words "Limited	HOP, UC			
The new name must be distinguishable and contain the words "Limited	Liability Company," the design	ation "LLC" or the abbre	viation "L.L.C."	
Enter new principal offices address, if applicable:				_
(Principal office address MUST BE A STREET ADDRES.	<u></u>	• •	-:	
	-		، د د	
			. · · ·	
Enter new mailing address, if applicable:		: , -	က်	
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>	1.1	ÇYY	_
				_
B. If amending the registered agent and/or registered off agent and/or the new registered office address here:	fice address on our recor	ds, <u>enter the name o</u>	f the new regis	_ terec
Name of New Registered Agent:				_
New Registered Office Address:				_
	Enter Florida st	rect 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>	Name	Address	Type of Action
			□Add
			□Remove
			□ Change
			☐Remove
			☐ ☐ ☐ Change
			∴∐Add
			 ⊡Remove
			□ Change
			□ Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

f amending any other information, enter change(s) here: (Attac	h additional sheets, if necessary.)
	<u>:-</u>
	<u>.</u>
	· ·
· · · · · · · · · · · · · · · · · · ·	(1)
	
fective date, if other than the date of filing:	(optional)
an effective date is listed, the date must be specific and cannot be prior to date of ote: If the date inserted in this block does not meet the applicable statu	filing or more than 90 days after filing.) Pursuant to 605.020
ocument's effective date on the Department of State's records.	nory many requirements, this date with not be fisted as
record specifies a delayed effective date, but not an effective time, at 12 is filed.	(:01 a.m. on the earlier of: (b). The 90th day after the
ated $05/26$ 2621	
Signature of a member op sensorized repr	resentative of a member
	F SCAS LABELLA.
£: (13C A 1)	· · · · · · · · · · · · · · · · · · ·