Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000329811 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

***	-	
	\sim	•

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:			

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PETS FIRST VETERINARY SERVICES LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PEIS	FIRST VETERINARY SERVICES L	LC		
(Name of the L.	mited Liability Company as it now appe (A Florida Limited Liability Company	cars on our records.)		_
The Articles of Organization for this Limited			and a	essigned
lorida document number L21000323055	•			
his amendment is submitted to amend the f	ollowing:			
If amending name, enter the new name	of the limited liability company	<u>here</u> :	2021	•
he new name must be distinguishable and contain th	e words "Limited Liability Company," the	designation "LLC" or t	he'abbreviation'"	<u>'I I C"</u>
		g	1/3 -	*** .
nter new principal offices address, if app			ري .٠٠.	
^p rincipal office address MUST BE A STRI	EET ADDRESS)		P	<u> </u>
			ြွှဲ့ မှု	form. Name
			5.	
nter new mailing address, if applicable:				
Mailing address MAY BE A POST OFFIC			·	
Againg Hauress MAY DE A 1 USI OF FIC	<u></u>			
	-			
. If amending the registered agent and/or gent and/or the new registered office add	registered office address on our ess here:	records, <u>enter the</u> r	name of the n	e <u>w regis</u> i
Name of New Registered Agent:	NATALIE GUTIERREZ			··
New Registered Office Address:	1020 WREN AVE		· _ · · · · · · · · · · · · · · · · · · ·	
	Enter Flo	orida street address		
	MIAMI SPRINGS	, Florida	33166	
		1,1011119		

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

Title	Name	Address	Type of Action
			□Add
			□Remove
			□Add
			□Remove
			□Change
			□Remove
			Change
· ·			□Add
			□Remove
		····	☐ Change
		***************************************	□Add
			Remove
			☐ Change
			□Add
			Remove

D.

			· 		-
					-
					_
				·	_
					~
					-
					••
					-
		······		··—— <u>—</u>	-
			_ ,		-
				<u> </u>	_
			<u></u>	21 S	•
			is k	, O	• •
			: 1	- w	
				-45	
					
				<u> </u>	
fective date, if other than the date of	f filing.				
in effective date is listed, the date must be speci	rific and cannot be prior to da	te of filing or more than 90 d	_ (optional) ays after filing.) Pu	irsuant to 605	.0207
ote: If the date inserted in this block does to be determined by the behavior of the behavior.	int of State's records.	statutory filing requireme	ents, this date wil	l not be liste	ed as
ecord specifies a delayed effective date, b is filed.	out not an effective time,	at 12:01 a.m. on the carlie	er of: (b) The 90	Ith day after	r the
	1				
ited July 23	2021				
$\langle \ \rangle \wedge$					

Filing Fee: \$25.00

Natalie Gutierrez

Typed or printed name of signee