K22 (CCCC) 35383

(Requestor's Name)
(Address)
(Address)
(1001000)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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AUG -5 2022 M. SOLOMON

Enclosed is a check for the following amount:

S25.00 Filing Fee

☐ \$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)

Maning Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

TO ARTICLES OF ORGANIZATION OF

Holy Ground	Pet Services ed Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
The Articles of Organization for this Limited Lia Florida document number <u>L22000353</u>	ability Company were filed on <u>81/12/2022</u> and assigned 3.83.
This amendment is submitted to amend the follo	owing:
A. If amending name, enter the new name of	the limited liability company here:
The new name must be distinguishable and contain the wo	ords "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	ible:
(Principal office address MUST BE A STREET	T ADDRESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	BOX)
B. If amending the registered agent and/or reagent and/or the new registered office address	egistered office address on our records, enter the name of the new registerous here:
Name of New Registered Agent:	Yavier K McCullough
New Registered Office Address:	11401 Patch St Enter Florida street address
	Spring Hill . Florida 34609.
New Registered Agent's Signature, if changing R	egistered Agent:
	d agent and agree to act in this capacity. I further agree to comply with the er 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.

ff Changing Registered Agent, Signature of New Registered Agent

or removed f	from our records:		
	anager uthorized Member		
Title	<u>Name</u>	Address	Type of Action
MGR	Xavier K Mchillough	11401 Patch St Spring Hill, FL	3409 MAdd
			□Remove
			□Change
			□Add
			□Remove
			□Change
			☐ Add ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
			Change
			🗆 Add
			Remove
			□Change
			□Ađd
			□Remove
			□Change
			□Add
			□ Rеточе

_ Change

	3
	2.
	
ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to ote: If the date inserted in this block does not meet the applicat becoment's effective date on the Department of State's records.	(optional) o date of filing or more than 90 days after filing.) Pursuant to 605.020 ble statutory filing requirements, this date will not be listed as
record specifies a delayed effective date, but not an effective times is filed.	ne, at 12:01 a.m. on the earlier of: (b) The 90th day after the
1	2
ated $\frac{5/24}{2002}$	
Samantha Hunt	rized representative of a member