122000044245

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MAR 1 7 2022

COVER LETTER

TO: Registration S Division of Co			
Bayshore (Garden Supply LLC		
SUBJECT:	Name of Lim	aited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	unitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Martina Boyd		
		Name of Person	
		Firm/Company	
	30886 Hammock Dr		
		Address	
	Big Pine Key FL 33043		
	manessa 12@yahoo.com	City/State and Zip Code	
For firsther information	E-mail address: (concerning this matter, please c	to be used for future annual report noti	fication)
Martina Boyd	concerning this matter, please c	765 461-1291	
	of Person		ne Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 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)
<u>Mailing Addre</u> Registration		Street Address: Registration Se	
Division of C	Corporations	Division of Cor	porations

P.O. Box 6327 Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

20221115

		42741	-8 47 7:41
Bayshore Garden Supply, LLC		**	
(Name of the Limi	ted Liability Compa (A Florida Limited	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited L		02/04/2022	and assigned
-	maionity Company		und assigned
Florida document number 1.22000044245	· · · · · · · · · · · · · · · · · · ·		
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name of	f the limited liab	ility company here:	
Groovy Dogs Yard Care, LLC			
The new name must be distinguishable and contain the	vords "Limited Liabi	lity Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		30866 Hammock Dr	
(Principal office address MUST BE A STREI	ET ADDRESS)	Big Pine Key FL 33043	
Enter new mailing address, if applicable:		30886 Hammock Dr	
		Big Pine Key FL 33043	
(Mailing address MAY BE A POST OFFICE	<u>BUAY</u>		
			
D. If amonding the assistant and assistant	i-td -65		
B. If amending the registered agent and/or in agent and/or the new registered office addre		address on our records, <u>enter the</u>	name of the new register
Name of New Registered Agent:	Martina Boyd		
New Registered Office Address:	30886 Hammoo	ck Dr	
		Enter Florida street address	
	Big Pine Key		33043

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.

City

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>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Add
			□Remove
			Change
			☐ Change
			🗀 Add
			□Remove
			Change
			□Add
			□Remove
			□Change

	
E.CC.	02/04/2022
(If an ef Note:	(optional) Tective date, if other than the date of filing:
ord is f	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the iled.
Dated	March 3. 2022. Martina Boyd Martina Boyd
	Maitra bod Signature of a member or authorized representative of a member
	Martina Boyd

Filing Fee: \$25.00