L22000156149

(Red	questor's Name)	
(Add	dress)	
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(Cit	y/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

10: Registration Se Division of Cor		•				
	E K9 FLORIDA LLC		,			
SUBJECT:	Name of Lim	Name of Limited Liability Company				
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please return all correspo	endence concerning this matter	to the following:				
	JEREMIE D NIX					
		Name of Person				
	RIDGESIDE K9 FLORID	A LLC				
		Firm/Company	·			
	2718 SE 45TH AVE					
		Address				
	OCALA. FL 34480					
		City/State and Zip Code				
	JAY@RIDGESIDEK9.CO	M to be used for future annual report notifi	cation)			
For further information of	oncerning this matter, please c		carron,			
	oncerning this matter, prease c					
JEREMIE D NIX		352 496-6859 at ()				
Name o	f Person	Area Code Daytime	Telephone Number			
Enclosed is a check for the	ne following amount:					
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
Mailing Addres		Street Address:				
Registration S Division of C		Registration Sec Division of Corn				

P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RIDGESIDE K9 FLORIDA LLC			
(Name of the Limi	ted Liability Compa (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited I. Florida document number L22000156149			and assigned 9: 58
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liab	pility company here:	
RIDGESIDE K9 CENTRAL FLORIDA LLC			
The new name must be distinguishable and contain the	words "Limited Liab	ility Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if appli-	cable:		
(Principal office address MUST BE A STREE	ET ADDRESS)		
			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	BOX)		
		 	
B. If amending the registered agent and/or agent and/or the new registered office addresses	~ .	address on our records, enter the na	me of the new registered
Name of New Registered Agent:	RICHARD M	SANDY	
New Registered Office Address:	704 SW 3RD /	AVENUE	
	 -	Enter Florida street address	
	OCALA	Florida ³	4478

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 Changing Registered Agent, Signature of New Registered Agent

Zip Code

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
AMBR	NICHOLLE I. NIX	2718 SE 45TH AVENUE	≡ Add
	•	OCALA, FL 34480	□Remove
			□Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			Change
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E. Effective date, if other than the (If an effective date is listed, the date in Note: If the date inserted in this document's effective date on the	nust be specific a block does not	and cannot be prior t meet the applic	to date of filing or a able statutory fili	nore than 90 days a	ptional) after filing.) Pu this date wi	irsuant to 6 If not be I	505.0207 isted as	' (3)(the
f the record specifies a delayed effect ecord is filed.	tive date, but n	ot an effective ti	me, at 12:01 a.m.	on the earlier of	(b) The 9	0th day a	fter the	
Dated AUGUST 31		2022					2022	
Dated Modos 137			<u></u>			<u>.</u> 1.	SEP	
	Signature of	a member or author	rized representativ	e of a member		<u> </u>	8-	- <u>-</u> -
JEREMIE D NIX	<u>.</u>		,				AH 9	

Typed or printed name of signee