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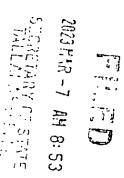
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COVER LETTER

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Registration Section **Division of Corporations**

SUBJECT: MIAMI PET SITTING SERVICES, LLC
Name of Limited Liability Company

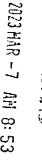
The enclosed Articles of Amendment and feets) are submitted for filing.

Please return all correspondence concerning this matter to the following:

	Corpor	ate Maintenance Le	ad
	Proc	essing Department	
		Firm Company	
		l450 Vassar St	
		Address	
		Reno. NV 89502	
		City State and Zip Code	
	I:-mail address, i	to be used for future annual report noti	fication)
For further information c	oncerning this matter, please c		
Process	ing Department	, 638-2320	
Name of Person Area Code Daytime Telephone Numb		a Telephone Number	
Enclosed is a check for t	he 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 (senclosed)
	ING ADDRESS: ration Section	STREET/COUR Registration Section	

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

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(<u>Name of the Limited Liability C</u> (A Florida Lim	ompany as it now appears on our records.)	
	nited Liability Company)	
The Articles of Organization for this Limited Liability Comp. Florida document number L22000159385	pany were filed on 04/04/22	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
BARK IN S	STYLE MIA. LLC	
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or the	ie abbreviation "L.E.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRES.	(S)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registere registered agent and/or the new registered office address		ter the name of the
egistered agent and/or the new registered office address	S HCTC.	
Name of New Registered Agent		
Name of New Registered Agent:		
Name of New Registered Agent: New Registered Office Address:	Later blanch street with the se	
	Later Florisla street address	

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 fighting ocument is being filed to merely reflect a change in the registered office address. Thereby confirm that the limited flubility 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	<u>Address</u>	Type of Action
. — _			
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			☐ Change
			Remove
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Signature of a member or authorized representative of a member	record specifies a delayed effective date, but not an effective time, at 12 ne 90th day after the record is filed.	:01 a.m. on the ear	lier (
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			20 1 ़
Yaramis Caminam	Signature of a member or authorized representative of a member	\$\frac{1}{5}\text{Y}	 1
	Varamia Caminara	SET :	==
	Typed or printed name of signee		Ç

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Filing Fee: \$25.00