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PICK-UP WAIT MAIL				
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(Document Number)				
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Special Instructions to Filing Officer:				

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COVER LETTER

TO: Registration Section

Tallahassee, FL 32314

SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of .	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Natalie Conner		
		Name of Person	
	Love My Dog Boutique &	Grooming, LLC	
	Firm/Company		
	1010 18th St., N.		
		Address	
	St. Petersburg, FL 33713		
		City/State and Zip Code	
	Iguerry@lovemydogresort.c	com to be used for future annual report noti	45 mains
Con fourth in Commetices of	oncerning this matter, please of		neation)
	oncerning this matter, piease of		
Natalie Conner		727 5122939 at ()	
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for th	ne 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)
Mailing Addres	<u>s:</u>	Street Address:	
Registration Section Division of Corporations		Registration Section Division of Corporations	
P.O. Box 6327		The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2022 MAY 19 PM 4: 09

Love My Dog Boutique & Grooming, LLC (Name of the Limited Liability Company as it now appears on our records EURE IARY OF STATE
(A Florida Limited Liability Company)

TALLAHASSEE FL TALLAHASSEE, FL The Articles of Organization for this Limited Liability Company were filed on April 18th, 2022 and assigned Florida document number ± 22000184878 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Love My Dog Grooming & Boutique, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE_BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address ___. Florida ______ Zip Code

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Add
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Effective date, if other than the (If an effective date is listed, the date mu Note: If the date inserted in this b document's effective date on the E	lock does not meet the applicable statutory filing requ	(optional) in 90 days after filing.) Pursuant to 605.0207 (3 direments, this date will not be listed as th
he record specifies a delayed effection ord is filed.	ve date, but not an effective time, at 12:01 a.m. on the	earlier of: (b) The 90th day after the
Dated May 17th	2022	
	Signature of a member or authorized representative of a m	tember
Manuffa Common	·	
Natalie Conner	Typed or printed name of signee	

Filing Fee: \$25.00