## L22000296771

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## **COVER LETTER**

TO: Registration S Division of Co			·			
Wolfe Do	gs, LLC					
SUBJECT: Name of Limited Liability Company						
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.				
Please return all corresp	ondence concerning this matter	to the following:				
	Rebecca Wolfe					
	Name of Person					
	Wolfe Dogs, LLC					
	Firm/Company					
	54 Widener Ct.					
		Address				
	St. Johns, FL 32259					
		City/State and Zip Code				
	beckyindurbin@gmail.com					
For further information	E-mail address: (concerning this matter, please c	to be used for future annual report not	ufication)			
Rebecca Wolfe		(904) 252-1	952			
Name of Person		at () Area Code Daytir	ne Telephone Number			
Enclosed is a check for	the 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 Address: Registration Section		Street Address: Registration Section				
Division of Corporations		Division of Corporations				
P.O. Box 6327			The Centre of Tallahassee			
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Wolfe Dogs, LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our reco Liability Company)	rds.)
The Articles of Organization for this Limited Liability Company Florida document number <u>L22000296771</u> .	were filed on July 1, 2022	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
Beckys Board Charcuterie, LLC		
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LL	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	54 Widener Ct.	· 2
Principal office address MUST BE A STREET ADDRESS)	St. Johns, FL 32259	023 F
		<del></del>
		21
Enter new mailing address, if applicable:		<u> </u>
Mailing address MAY BE A POST OFFICE BOX)		70 -
		7 NT B
3. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>ente</u>	r the name of the new regist
Name of New Registered Agent:	<del></del>	
New Registered Office Address:	Enter Florida street addr	rens
	ı	Florida
	, r	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 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
			□Remove
			□Change
		□Add	
			Remove
			☐ Change
			Remove
			□Change
			□Add
			□ Rеточе
			□Change
			□Add
			Remove
			[ Change
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			□Remove
			□ cv

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: \_\_\_\_\_\_\_ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record 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 record is filed. Signature of a member or authorized representative of a member Rebecca Wolfe Typed or printed name of signee

Filing Fee: \$25.00