L23000049900

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(======================================					
(Document Number)					
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D CUSHING

COVER LETTER

TO: Registration Section Division of Corporations		
White Dog LLC SUBJECT:		
	Name of Limited Lia	bility Company
Dear Sir or Madam:		
The enclosed Statement of Correction and	fee(s) are submitted for filir	ıfr
Please return all correspondence concernin	g this matter to the followin	ß;
Brooke Schumm III		
Name of Person		-
Paul M. Cowan & Associates, PA		
Firm/Company		
8925 SW 148th St., Suite 100		
Address		_
Palmetto Bay, FL 33176		
City/State and Zip Cod	de	_
brooke@peprobatelaw.com		
E, mail address: (to be used for future	annual report notification)	_
For further information concerning this ma	tter, please cali:	
Brooke Schumm	410	241-8251
Name of Person	at (at Code	Daytime Telephone Number
Mailing Address:		Street Address:
Registration Section Division of Corporations		Registration Section Division of Corporations
P.O. Box 6327		The Centre of Tallahassee
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following amo	ount:	
□\$25 Filing Fee □ \$30 Filing Fee Certificate of \$		\$60 Filing Fee. Certificate of Status & Certified Copy

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CR2E062 (9/15)

STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

		ame of the limited liability company is: White Dog L	•	icii.		
SECOND: The Florida Document number of the limited liability company is: L23000049900						
<u>THIRI</u>	THIRD: Document to be corrected is: Articles of Amendment to Articles of Organization filed 9-1					
	ſ	CHECK THE APPROPRIATE BOX AND COM	IPLETE THE APPLICABLE STA	TEMENT		
	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:					
	Due to scriviner's error, the first line of the section "Amending Authorized Person(s) authorized to manage"					
	should read:"MGR" as to Frank Rubino, with the address of 550 Biltmore Way,#780, Coral Gables, FL 33134.He is					
	not a member. In the 2nd line, there should be no entry because Ana M. Santisteban is not & has not been a member.					
	OR					
	Was d	efectively signed. The manner in which the docume ows:	ent was defectively signed and the ap	propriate correction are		
				20 <u>2</u>		
				3.75		
	<u>OR</u>			P =		
		ectronic transmission of the record was defective.	mm 11/1/2023	규 · · · 		
		Signature of Authorized Representative	Date			
accepti New Ro I hereb provisio obligat	ng the d egistere y accept ons of a ions of i	ew registered agent, if applicable :(NOTE: if correct lesignation). d Agent's Signature, if changing Registered Agent: I the appointment as registered agent and agree to a ll statutes relative to the proper and complete perforny position as registered agent as provided for in Co e in the registered office address. I hereby confirm t	et in this capacity. I further agree to mance of my duties, and I am familia hapter 605, F.S. Or, if this document	comply with the ir with and accept the is being filed to merely		
of this c		e in the regimered office diducess. Pricretly confirm t	na na mmea namny empany ma	, con mapore in writing		
		Registered Age	nt's Signature			
		Filing Fee: Certified Copy:	\$25.00 \$30.00 (optional)			