

L23000189228

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(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

(Business Entity Name)

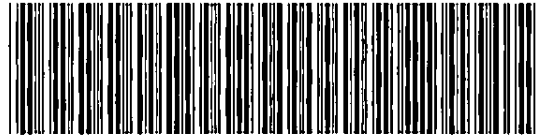
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TALLAHASSEE, FLORIDA

MAY 12 2023

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DATE: 05/11/23

NAME: DOGUSA, LLC

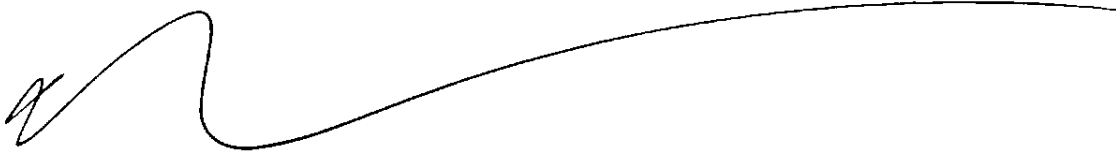
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DOGUSA, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Alan T. Hawkins

Name of Person

INDEPENDENT LAW, PLLC

Firm/Company

2106 NW 4TH PL

Address

GAINESVILLE

City/State and Zip Code

ahawkins@independent.law

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alan Hawkins

Name of Person

at (

_____) 3523534048

Area Code

Daytime 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 &
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(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

2023 MAY 11 AM 10:10

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

If Changing Registered Agent, Signature of New Registered Agent

[illegible]

[illegible]

(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)

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

Alan T. Hawkins, Esq.
Typed or printed name of signee

Filing Fee: \$25.00