L23000210872

(Re	questor's Name)	
(,,	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
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COVER LETTER

	gistration Se vision of Cor				
cupiezt.		numerce Limited Liability Con	npany		
SUBJECT:		Name of Lim	ited Liability Company	<u></u>	
The enclose	d Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please retur	n all correspo	ondence concerning this matter	to the following:		
		Patricia K. Gase			
			Name of Person		
		Yipee E			
			Firm/Company		
		221 E. Walnut St			
			Address		
		Avon Park, Fl 33825			
			City/State and Zip Code		
		Potaase (to be used for future annual report n	otification)	
For further	information c	oncerning this matter, please c	all:		
Patricia K (Gase		863 873-6289		
	Name o	f Person	Area Code Dayt	ime Telephone Number	
Enclosed is	a check for th	he 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)	
	ailing Addres		Street Address: Registration S		
Di	vision of C	Corporations	Division of C	orporations	
	O. Box 632 Illahassee, I		The Centre of 2415 N. Mon	roe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

YIPEE E. COM LIMITED LIABII		*			
(Name of the Limi	ted Liability Compa (A Florida Limited L	ny as it now appears on our record liability Company)	<u>s.</u>)		
The Articles of Organization for this Limited L	iability Company	were filed on <u>5/2/2023</u>	and	l assigne	:d
Florida document number L23000210872	,				
This amendment is submitted to amend the following	lowing:				
A. If amending name, enter the new name o	of the limited liab	ility company here:			
YIPEE PETS E COM LLC					
The new name must be distinguishable and contain the	words "Limited Liabil	ity Company." the designation "LLC	" or the abbreviatio	n "L.L.C."	:
Enter new principal offices address, if appli	cable: X	7901 4TH ST.N.			
(Principal office address MUST BE A STREE		SUITE #594 84 84	23	1023	
The put office duties west bis it of the	57 .1DD112007	ST. PETERSBURG, FL. 3370	2 75.3	7.	
			-	<u></u>	
knter new mailing address if applicable	4	221 E. WALNUT ST	~-	⊒~	٠.
Enter new mailing address, if applicable:		AVON PARK, FL. 33825	,	- ===	``
(Mailing address MAY BE A POST OFFICE	<u> </u>		. <u>::</u> ::::::::::::::::::::::::::::::::::	<u></u>	
B. If amending the registered agent and/or agent and/or the new registered office addre		nddress on our records, <u>enter</u>	the name of the	new re	gistered
Name of New Registered Agent:	Patricia K. Gasc	: _ 4		<u>-</u>	
New Registered Office Address:	7901 4th, St. N.				<u>_</u>
		Enter Florida street addres			
	St. Petersburg, l	FL 🖟 , Flo	orida <u>33702</u>	 ,	
		City	Zip C	ode	

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
	<u></u>		□Add
			□Remove
			□Change
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an efi lote:	ive date, if other than the date of filing:
recor Lis fi	d 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 led.
ated	5/16/2023
	College Hart
	Signature of a member or authorized representative of a member