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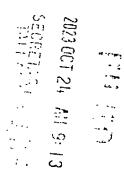
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PICK-UP WAIT MAIL
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Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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Office Use Only



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COVER LETTER

TO: Registration S Division of Co			
Pets & Co	mpawnions LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Delmario Graham		
		Name of Person	
		Firm/Company	1984 1 A A A A A A A A A A A A A A A A A A
	3255 NW 94th ave box 80		2023 SEC TA
	 ,	Address	0CT
	Coral Springs, FL 33065		2 1
	delmario.graham@fhullbrir	City/State and Zip Code	2023 OCT 24 MM 9: 13 SECISE 1/107 (12.27) TAY L (All 17.27) cation)
		to be used for future annual report notifi	cation)
For further information of	concerning this matter, please c	all:	
Delmario Graham	<u> </u>	786 815-7681 at ()	
Name o	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	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)
Mailing Address Registration Division of C P.O. Box 632 Tallahassee,	Section Corporations 27	Street Address: Registration Sec Division of Corp The Centre of Ta 2415 N. Monroe Tallahassee, FL.	orations illahassee Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Pets & Compawnions LLC		
(<u>Name of the Limited Liability Company as it now ar</u> (A Florida Limited Liability Compa	opears on our records.) any)	
ne Articles of Organization for this Limited Liability Company were filed or	n <u>06/05/2023</u>	and assigned
orida document number 1.23000272459		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liability compan	ıy here:	
e new name must be distinguishable and contain the words "Limited Liability Company,"	the designation "LLC" or the abbrev	iation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		2
	<u> </u>	23
nter new mailing address, if applicable:		24
Mailing address MAY BE A POST OFFICE BOX)	, (
	71. 2	<u>ت</u> ب
	-:.	$\overline{\omega}$
. If amending the registered agent and/or registered office address on orgent and/or the new registered office address here:	ur records, enter the name of	the new regis
Name of New Registered Agent:		
New Registered Office Address:		
Enter	r Florida street address	
	, Florida	

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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
AMBR	Demario Graham	3255 NW 94th Ave Box 8020	
		Coral Springs F1. 33065	■Remove
			□Change
AMBR	Delmario Graham	3255 NW 94th Ave Box 8020	≘ Add
		Coral Springs FL 33065	□Remove
			Change
			SI CRE PRemove Programme SI CRE Programme Prog
			<u>Pi</u> ⊕Add
			□Remove
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			🗆 Remove
			Change

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First Square (optional) If cective date, if other than the date of filing: If course and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,020 of the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a bounent's effective date on the Department of State's records. The 90th day after the is filed. If the date inserted in this date will not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the is filed.							
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Signature of a member or authorized representative of a member	October 10 2023						
Signature of a member or authorized representative of a member							
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