Division of Corporations

8/16/23, 8:43 PM

# Florida Department of State 852 L23 Electronic Filing Cover Sheet 852

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : LICENSES & PERMITS LLC

Account Number : I20210000155 Phone : (305)226-8727 Fax Number : (305)226-8767

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

<b>Email</b>	Address:			
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1823 ALIC LT PH 12: 00

DEPARTMENT OF STATE

PHYSION OF CERPORAPION

TALLANIA SSEE. PLORIDA

# LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PET PAWS LLC

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Estimated Charge	\$25.00

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APPRUYED

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K. Brumbley

## **COVER LETTER**

	distration Signature of Con			· ·
SUBJECT:	PET PAW	S LLS		
		Name of L	inited Liability Company	
The enclosed	d Articles of	Amendment and fee(s) are su	Ibmitted for filing.	
		ondence concerning this matte		
		Lucia Estrella		
			Name of Person	
		Licenses & Permits LLC		
		<del></del>	Firm/Company	
8300 W Flagler St Suite 114				
Address				
	Miami, Fl 33144			
			City/State and Zip Code	
		licenses   14@gmail.com		
For further in:	formation co	E-mail address: incerning this matter, please (	(to be used for future annual report no	otification)
Lucia Estrella		,,	305 226-8727	
	Name of	Person	at () Area Code Dayti	me Telephone Number
Enclosed is a	check for the	following amount:		
<b>≅</b> \$25.00 Fi		\$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 Division of Corporations		Street Address: Registration Se Division of Co		
	Box 6327 hassee, FI		The Centre of	Tallahassee
1 11111	шазэсс, f I	2 343 14	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Pet Paws LLC		
(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our records.) Liability Company)	<del></del>
The Articles of Organization for this Limited Liability Company Florida document number L23000295852	were filed on June 20, 2023	and assigned
Florida document number		
This amendment is submitted to amend the following:		
$\Lambda$ . If amending name, enter the new name of the limited liab	ility company here:	
Mobile Grooming Pet Paws LLC		
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
D. If among the state of the st		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, enter the na	me of the new registered
		2023
Name of New Registered Agent:		AUG APT
New Registered Office Address:		J ENG
A TOTAL TOTAL CONTROL ADDRESS.	Enter Florida street address	
	, Florida	- 등의 <b>등</b>
-	Ciny , Florida	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

Title	<u>Name</u>	<u>Address</u>	Type of Action
			□Add
			□Remove
			Change
			🗆 Add
			□Remove
			Change
			□Remove
			Change
			□Rcmove
			□Add
			Change
<u>_</u>			□Add
			□Remave
			□Change

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If an eff Note:	August 16 2023  (optional)  Tective date, if other than the date of filling:  Tective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pur  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will nent's effective date on the Department of State's records.	suant to 605.0207 ( not be listed as t
rd is fil		th day after the
Dated	August 16 2023	
	gignature of a member or authorized representative of a member	
	Auri Stella Mendoza Pastorelli	

Filing Fee: \$25.00