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COVER LETTER

TO: Registration S Division of Co			; ,	Ž.
Angry Dog	Investments LLC			
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspondent	ondence concerning this matter	to the following:		
	Michael Charlton			
		Name of Person		
	Angry Dog Investments L	I.C		
	-	Firm/Company		
	5312 Night Star Trl			
		Address	11.	
	Odessa, FL 33556			
		City/State and Zip Code		
	mac@pro-dig-usa.com			
For further information of	E-mail address: (concerning this matter, please c	to be used for future annual report notificational:	on)	
Michael Charlton	- ,	785 393-3918		
Name o	of Person	at ()	ephone 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)	Certified C	of Status &
<u>Mailing Addre</u> Registration		<u>Street Address:</u> Registration Section	1	
Division of C	Corporations	Division of Corpora	ntions	
P.O. Box 633	7	The Centre of Talla	hassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ANGRY DOG INVESTMENTS LLC

(<u>Name of the Limited Liability Com</u> (A Florida Limite	pany as it now appears on or d Liability Company)	ir records.)		
The Articles of Organization for this Limited Liability Compare Florida document number 1.23000461471	ny were filed on 10/06/202	2.3	_ and assign	ed
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited lia	ability company here:			
The new name must be distinguishable and contain the words "Limited Lia	ibility Company," the designat	ion "LLC" or the abbrev	viation "L.L.C.	
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)			. 29_	
			723 0	
			CT CT	
Enter new mailing address, if applicable:			5	:
(Mailing address MAY BE A POST OFFICE BOX)		•		
			- 7:	
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here:	e address on our records	s, <u>enter the name o</u>	f the new re	gistere
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida stre	ret address		
		Florida		
	City		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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Michael Charlton	5312 Night Star Trl, Odessa, FL 33556	\exists Add
			□Remove
			□Change
AMBR	Emma Cassidy	5312 Night Star Trl, Odessa, FL 33556	■Add
			□Remove
			□Change
			□Add
			□Remove
		,	□Change
			□Add
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fective	date, if other than the date of filing: (optional)	າ. ງ	<u>></u>	• •
in effect	ve date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing he date inserted in this block does not meet the applicable statutory filing requirements, this date	.) Pursuar	nt to 605.02	207 i as 1
	's effective date on the Department of State's records.	J. Francisco	\C1	
ecord s is filed	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The	ie 90th d	ay after th	ne
1.5 111.00				
ated				
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
	Signature of a member or authorized representative of a member			
	Signature of a member or authorized representative of a member Michael Charlton			

Filing Fee: \$25.00