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COVER LETTER

Division of	Corporations		*
	Y TAILS BOARDING AND SERV	TICES LLC	•
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Article	es of Amendment and fee(s) are sub	mitted for filing.	
Please return all corr	respondence concerning this matter	to the following:	
	Denis Peregoedov		
		Name of Person	
	WAGGY TAILS BOARDI	NG AND SERVICES LLC	
		Firm/Company	
	7113 US-98		
		Address	
	Panama City Beach, Flor	ida, 32407	
	waggytailspcb@gmail.con	City/State and Zip Code	
		to be used for future annual report noti:	fication)
For further informati	ion concerning this matter, please ca	all:	
Denis Peregoedov		850 815-8160	
Na	me of Person	Area Code Daytime	e Telephone Number
Enclosed is a check t	for the following amount:		
□ \$25.00 Filing Fo	ee ≤ \$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)
<u>Mailing Ad</u> Registrati	ldress: on Section	Street Address: Registration Sec	rtion

Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HAPPY TAILS BOARDING AND SERVICES LLC

New Registered Agent's Signature, if changing Registered Agent:

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) 03/18/2024 The Articles of Organization for this Limited Liability Company were filed on _ and assigned L24000133954 Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: WAGGY TAILS BOARDING AND SERVICES LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: 7113 US-98 New Registered Office Address: Enter Florida street address Florida ³²⁴⁰⁷ Panama City Beach

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 Changing Registered Agent, Signature of New Registered Agent

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>	Name	Address	Type of Action
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			□Remove
			□Change
			□Add
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<u>te:</u> If the date in	isted, the date must be serted in this block	does not meet the	applicable statu	iling or more than tory filing requi	90 days after filin rements, this dat	g.) Pursuant to 605 te will not be list	6.02) ed a
ument's effectiv	e date on the Depar	tment of State's re	ecords.				
cord specifies a s filed.	delayed effective da	te, but not an effe	ctive time, at 12:	01 a.m. on the e	earlier of: (b) T	The 90th day after	r th
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	Sign	nature of a member	🗲 authorized repre	sentative of a me	mber		

Filing Fee: \$25.00