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Division of Corporations

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From:

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Fax Number : (323)389-0502

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

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MOJO'S DOGHOUSE LLC

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-NOV-2-6-2024

Electronic Filing Menu — Corporate Filing Menu

Help

COVER LETTER

	gistration Se vision of Cor					
SUBJECT:		OGHOUSE LLC				
SUBJECU:		Name of Limi	ited Liability Company			
The enclosed	d Articles of	Amendment and fee(s) are sub-	natted for filing			
Please retur	all correspo	ondence concerning this matter	to the following:			
		Mike Town				
			Name of Person			
		Legalzoom.com, Inc.				
			Firm/Company		20	
		9900 Spectrum Dr			124 MC	۲.
			Address)¥ 2	, r
		Austin, TX 78717			5) 6 2	The lies of
		missmjæ@gmail.com	City/State and Zip Code		2024 NOV 26 PH 4: 43	Ç
			o be used for future annual report not	fication)	T	
For further in	nformation c	oncerning this matter, please or	all			
Mike Town			800 773-0888 at ()			
	Name o	d Person		e Telephone Number		
Enclosed is a	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)	Certified C	of Status &	
	Registr	ING ADDRESS:	STREET/COURI	n		

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

From: Rajiv Srivastava

MOJO'S DOGHOUSE LLC		
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our rec- Liability Company)	ard <u>s.)</u>
_	y were filed on 04/02/2024	and assigned
This amendment is submitted to amend the following:		
e Articles of Organization for this Limited Liability Company were filed on 04/02/2024 and assigned orda document number 1.24/00/15/64/08		
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "L	.L.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	· · · · · · · · · · · · · · · · · · ·	
(Principal office address MUST BE A STREET ADDRESS)		202
		. <
Enter new mailing address, if applicable:		5 o :
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be disunguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation 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 nairegistered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida Street address Florida		
		Stor F
		THE LA
		rds, enter the name of the new
Name of New Registered Agent:		·
New Registered Office Address:		
	Enter Florida street ada	Iress
	City	Zip Cock

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 Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

To:

Title	Name	Address	Type of Action
AMBR	Melanic Janet Nelson		O Add
			□ Remove
		405 SE 2nd Ave., Stc. 24 Gainesville, FL 32601	■ Change
			☐ Remove
			☐ Change
			Add 2024 Note 1
			Di Change 1
			PA Add: 43
			Change
			D Add
			☐ Remove
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Signature of a member or authorized representative of a member	ateu			