## L24000176219

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Certified Copies	Certificates of	Status
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## COVER LETTER

TO: Registration Section Division of Corporations
SURJECT: ORANGE DOG LABOR LLC
SUBJECT: ORANGE DOG LABOR LLC  Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
CATHER WE DRISCOLL Name of Person
Name of Person
ORANGE DOG LABOR LLC Firm/Company
621 SE 8th AVE.
Address
POMPANO BEACH FL 33060
City/State and Zip Code
Pompano Beach FL 33060  City/State and Zip Code  Cara @ orange dog labor. com  E-mail address: (to be used for fundre annual report notification)
For further information concerning this matter, please call:
PATHERIE DOISCOLL HALL 987-3046
CATHERINE DRISCOU at (464) 987-3046  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount: PREVIOUSLY SENT
☐ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee,  Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
Mailing Address: Street Address:
Registration Section Registration Section  Division of Comparations  Division of Comparations
Division of Corporations P.O. Box 6327  Division of Corporations The Centre of Tallahassee
Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

12/17/24

## FLORIDA DEPARTMENT OF STATE Division of Corporations

November 18, 2024

CATHERINE DRISCOLL 621 SE 8TH AVE POMPANO BEACH, FL 33060

SUBJECT: ORANGE DOG LABOR LLC

Ref. Number: L24000176219

We have received your document for ORANGE DOG LABOR LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a PROFIT CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Letter Number: 624A00025152

Neysa Culligan Regulatory Specialist III

www.sunbiz.org

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2024 DEC 17 PM 4: 15

ORANGE DOG LABOR	LLC	111 4- 15
ORANGE DOG LABOR (Name of the Limited Liability Compar (A Florida Limited L	iy as it now appears on our rec lability Company)	OLLAHASSEE COLAIE
		/ .
The Articles of Organization for this Limited Liability Company	were filed on <u>4/15</u>	ere:  esignation "LLC" or the abbreviation "L.L.C."
Florida document number <u>L24000176219</u> .		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "l	J.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<del></del> _
(Principal office address MUST BE A STREET ADDRESS)		
	,	
Enter new mailing address, if applicable:	PO BOX 724	
(Mailing address MAY BE A POST OFFICE BOX)	POMPANO BE	ACH FL 33061
D. If amonding the registered agent and/or registered office a	ddraee on our rocards, and	tor the name of the new registered
agent and/or the new registered office address here:	uuress on our recorus, <u>em</u>	ter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address.	Enter Florida street add	dress
	,	tress Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of my duties, rovided for in Chapter 60	, and I am familiar with and 15, F.S. Or, if this document is

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
MGR	MICHAEL FINE	621 SE 8th AVE.	□Add
		POMPANO BEATH FL 3306	CEKemove
			□Change
			□Add
			□Remove
			□Add
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n effective date is l te: If the date it	other than the date of listed, the date must be spen inserted in this block doo we date on the Departmo	citic and c es not me	annot be price the appl	icable statu	filing or mor story filing	e than 90 day	<b>(option:</b> /s after fili ts, this da	ng.) Pursi	uant to 6 not be li	05.020 sted a
ecord specifies a is filed.	delayed effective date,	but not a	n effective	time, at 12	:01 a.m. or	the earlier	of: (b)	The 90ti	i day at	ter the
nted DECE	mber 12th		202	4						

Filing Fee: \$25.00