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(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	(Requestor's Name)
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Office Use Only



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COVER LETTER

Tallahassee, FL 32314

TO: Registration Se Division of Cor			
	ime travelers		
SUBJECT:	Name of Lim	ited Liability Company	•.
Dogs are time travelers 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: Gustavo Alfredo Cirulli Name of Person Dogs are time travelers Firm/Company 421 NW 11 st Address Homestead, Florida, 33030 City/State and Zip Code cirulligus@yahoo.com E-mail address: (to be used for future annual report notification)			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspondence	ondence concerning this matter	to the following:	
	Gustavo Alfredo Cirulli		
		Name of Person	
	Dogs are time travelers		
		Firm/Company	
	421 NW 11 st		
	 	Address	
	Homestead, Florida, 330	030	
		City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
	÷ -:		
	E-mail address: (to be used for future annual report notif	fication)
For further information c	concerning this matter, please co	all:	
Gustavo Alfredo Cirulli	i		
Name o	of Person	Area Code Daytime	e Telephone Number
Enclosed is a check for the	he following amount:		
	□ \$30.00 Filing Fee &	Certified Copy	Certificate of Status & Certified Copy
Mailing Address Registration S Division of C P.O. Box 632	Section Corporations	Street Address: Registration Sec Division of Cor The Centre of T	porations
Tallahassee,			e Street. Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Dogs are time travelers LLC		
(Name of the Limited Liability Com (A Florida Limite	npany as it now appears on our reco ed Liability Company)	rds.)
	ny were filed on 05/13/2024	and assigned
Florida document number L24000220672		
Articles of Organization for this Limited Liability Company were filed on		
A. If amending name, <u>enter the new name of the limited li</u>	ability company here:	
The new name must be distinguishable and contain the words "Limited Lie	ability Company," the designation "LI	.C" 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:		202E
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
		AS: 0 :
B. If amending the registered agent and/or registered offic	ee address on our records, <u>ente</u>	er the name of the new registered
agent and/or the new registered office address here:		STA STA
		, IE 5
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addi	ress
		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
AMBR	Gustavo Alfredo Cirulli	421 nw 11 st, homestead, FL 33030	□ Add
			□Remove
			
			□Add
			Remove
			□ Change
			🗆 Add
			□Remove
			□Change
			🗖 Add
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Effective date, if other than the of an effective date is listed, the date must Note: If the date inserted in this blo document's effective date on the De	be specific and cannot be prior to c ck does not meet the applicabl	late of filing or more than 9 e statutory filing require	(optional) 0 days after filing.) Pursuant to ments, this date will not be	605.0207 listed as
record specifies a delayed effective d is filed.	date, but not an effective time	, at 12:01 a.m. on the ea	rlier of: (b) The 90th day a	fter the
	2024			
08/30 Pated	·	• //	Many	
08/30 Dated	·		and a	

Filing Fee: \$25.00