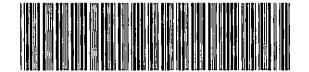
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: LA BONE PET G	ROOMING FACILITY, IN	<u>c</u>
DOCUMENT NUME			
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	BERNARD KOPET		
		Name of Contact Persor	1
	BERNARD KOPET P.A.		
		Firm/ Company	
	9031 PEMBROKE ROAD	• •	
		Address	
	PEMBROKE PINES, FL 33		
		City/ State and Zip Code	<u> </u>
		,	
BER	NARDKOPET@GMAIL.COI	M 	
	E-mail address; (to be u	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call,	
BERNARD KOPET		954-243-10	4(
Name o	of Contact Person	Area Co	4(₎ de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made		
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	☐S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	D\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
<u>Mai</u>	ling Address	Street	Address
Ame	indment Section	Amendment Section	
	sion of Corporations		n of Corporations
P.O. Box 6327 Tallahassee, FL 32314			Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

LA BONE PET GROOMING FACILITY, INC.

(<u>Name</u>	of Corporation as currently	filed with the Florida Dept. of	State)
P14000075738			
	(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Stanites, this ${\it F}$	lorida Profit Corporation adopts	s the following amendment(s) to
A. If amending name, enter the new n	ame of the corporation:		
			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	iation "Corp." "Inc." or "C	o". A professional corporation	ed" or the abbreviation
B. Enter new principal office address,	if applicable:		
(Principal office address <u>MUST BE A S</u>			
			
C. Enter new mailing address, if appl	icable:		
(Mailing address MAY BE A POST			
			家() 运
			THE THE
D. If any discrete make make and course or	allow wordstooned a 695 on a datus	es in Clauda anton the name of	2 7
D. If amending the registered agent at new registered agent and/or the ne		ss in Piorida, enter the name of	
	YUNIET CAPOTE		
Name of New Registered Agent			<u> </u>
	8739 STIRLING ROAD		<u></u>
	ıFlorida strec	t address)	
New Registered Office Address:	COOPER CITY	, Flo	33328-5932 irida
	10	Эцүг	(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regis		th and a want the obligations of	the constition
и истету ассери те арринитет ак regis	вегси адени гат јатина мл	<i>ини ассерь те оғнушилу о</i> ј .	те рохиюн,
`	Terriet Cap	ate	
	Signature of New Re	gistered Agent, if changing	

•

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P-President; V-Vice President; T-Treasurer; S-Secretary; D-Director; TR-Trustee; C=Chairman or Clerk; CEO=Chief Executive Officer; CFO-Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: XChange	PT	<u>John Doe</u>	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	PRES	JENNIFER UZCATEGUI	3500 NW 97TH AVENUE
Add			HOLLYWOOD, FL 33328
X Remove			
2) Change	PRES	YUNIET CAPOTE	3500 NW 97TH AVENUE
$\frac{X}{X}$ Add			HOLLYWOOD, FL 33328
Remove			
3 + Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)
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If an amendment provides for an exch provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
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provisions for implementing the ame	hange, reclassification, or cancellation of issued shares. endment if not contained in the amendment itself:

NOVEMBER 14, 2017 _____ if other than the The date of each amendment(s) adoption: date this document was signed. Effective date if applicable: _ (no more than 90 days after amendment file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. Adoption of Amendment(s) (CHECK ONE) The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval. ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s): "The number of votes east for the amendment(s) was/were sufficient for approval ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. Dated_____ NOVEMBER 11 Dated_____ Signature 1 Comet Coste (By a director, president or other officer - if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) YUNIET CAPOTE (Typed or printed name of person signing) PRESIDENT

(Title of person signing)