# I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and

Electronic Signature of Signing Authorized Person(s) Detail

#### 2018 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT DOCUMENT# L08000068062

Entity Name: PUPPY LOVE DOG TRAINING LLC

#### **Current Principal Place of Business:**

6154 NEFF LAKE ROAD BROOKSVILLE, FL 34601

#### **Current Mailing Address:**

6154 NEFF LAKE ROAD BROOKSVILLE, FL 34601

#### FEI Number: NOT APPLICABLE

### Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE	: KATHY FORNES			10/07/2018
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	MGR	Title	S	
Name	FORNES, KATHY	Name	FORNES, KATHY	
Address	6154 NEFF LAKE ROAD	Address	6154 NEFF LAKE ROAD	
City-State-Zip:	BROOKSVILLE FL 34601	City-State-Zip:	BROOKSVILLE FL 34601	

that my name appears above, or on an attachment with all other like empowered. 10/07/2018 SIGNATURE: KATHY FORNES OWNER

## Oct 07, 2018 Secretary of State CR5068733185

FILED

Certificate of Status Desired: No

Date