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M. MILLIGAN EXAMINER

SEP - 1 2015

COVER LETTER

Division of Cor			
Coral Farm	ns LLC		
50D0EC1.	Name of Lim	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Carol B. Spencer		
		Name of Person	
	Coral Farms MCS LLC		
	4	Firm/Company	
	P. O. Box 482		
		Address	
	Florahome, FL 32140		
		City/State and Zip Code	<u></u>
	coralfarmsmcsllc@windstre		
For further information c	E-mail address: (oncerning this matter, please calls	to be used for future annual report noti all:	fication)
Carol B. Spencer		386 546-1470	
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for the	ne following amount:		
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

ART	ICLES OF C	ORGANIZATION OF	ds.)
Coral Farms LLC			
(Name of the Limit	ted Liability Compa (A Florida Limited I	ny as it now appears on our recor Liability Company)	ds.)
The Articles of Organization for this Limited L	iability Company	were filed on 3/27/2002	and assigned
Florida document number L02000007395			
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name o	f the limited liab	ility company here:	
Coral Farms MCS LLC			
The new name must be distinguishable and contain the v	vords "Limited Liabil	lity Company," the designation "LL	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	able:	821 Coral Farms Road Unit 3	
(Principal office address MUST BE A STREET ADDRESS)		Florahome, FL 32140	
Enter new mailing address, if applicable:		P. O. Box 482	
(Mailing address MAY BE A POST OFFICE	BOX)	Florahome, FL 32140	
B. If amending the registered agent and/ registered agent and/or the new registered of			ls, <u>enter the name of the new</u>
Name of New Registered Agent:	Carol B. Spence	er	
New Registered Office Address:	821 Coral Farm	s Road Unit 3	
	····	Enter Florida street addre	522
	Florahome	. F	lorida 32140
		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 Changing Registered Agent) Signature of New Registered Agent

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
MGR	Carol B. Spencer	P. O. Box 482 Florahome, FL 3214	■ Add
			☐ Remove
			Change
			
			□ Remove
			☐ Change
			□ Add
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			Change
			Add
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Effective date, if other than the all (If 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 ca ck does not mee	nnot be prior to et the applicabl	late of filing or more e statutory filing r	than 90 days after fi equirements, this c	ling.) Pursuant to 605.020
the record specifies a delayed The 90th day after the reco		e, but not a	n effective tim	e, at 12:01 a.	m. on the earlier o
Dated August 21,		2015			
	arol B	Deve	er		·
	Signature of a me	. DAC	ed representative of	a member	

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Filing Fee: \$25.00