

L09000065609

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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(Business Entity Name)

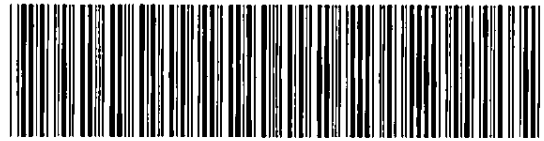
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FILED
2025
2024 MAR 21 AM 7:33
SECRETARY OF STATE
TALLAHASSEE, FL

cf 5/1/2025

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: APOGEE CONSULTING, 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:

Rustin Kluge

Name of Person

Firm/Company

1680 Michigan Ave Suite 700 #418

Address

Miami Beach, FL 33139

City/State and Zip Code

Rustin@rubyfamrsusa.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rustin Kluge

845

874 9698

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

APOGEE CONSULTING, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED

2025
2024 MAR 21 AM 7:33

SECRETARY OF STATE
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on July 8 2009

Florida document number L09000065609

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

APOGEE AGRICULTURE LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

1680 Michigan Ave Suite 700 #418

(Principal office address MUST BE A STREET ADDRESS)

MIAMI FL 33139

Enter new mailing address, if applicable:

1680 Michigan Ave Suite 700 #418

(Mailing address MAY BE A POST OFFICE BOX)

MIAMI FL 33139

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

DIROCCO & COMPANY CPA PA

New Registered Office Address:

7800 W. Oakland Park Blvd Building C Suite 306

Enter Florida street address

Sunrise, FL

Florida 33351

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

11 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

[illegible]

FBI — FBI — \$25.00