

Division of Corporations

Electronic Filing Cover Sheet

((H20000324508 3))



H200003245083ABCY

To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
Fax Number : (954)208-0845

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
FRANCO FARM LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$55.00

SEP 18 2020

S. YOUNG

Help

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Finnco Farm LLC

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

The Articles of Organization for this Limited Liability Company were filed on March 6, 2014
Florida document number 114000038573

FILED
2020 SEP 17 AM 11:17
CLERK OF CIRCUIT COURT
JACKSONVILLE, FLORIDA

This amendment is submitted to amend the following:

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

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: 158 North Street
(Principal office address MUST BE A STREET ADDRESS) Mattapoisett, MA 02739


Enter new mailing address, if applicable: 158 North Street
(Mailing address MAY BE A POST OFFICE BOX) Mattapoisett, MA 02739

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: C T Corporation System
New Registered Office Address: 1200 South Pine Island Road
Enter Florida street address
Plantation, Florida 33324
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.

 C T Corporation System by:
Olga Hinkel - VP

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager
AMBR = Authorized Member

[illegible]

1

Effective date, if other than the date of filing: _____ (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) if an effective date is listed, the date must meet the applicable statutory filing requirements; this date will not be listed as the

Filing Fee: \$25.00