## L19000283858

Office Use Only



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## **COVER LETTER**

TO:

Tallahassee, FL 32314

TO: Registration Division of C			
SUBJECT:	Dadegreens L	ie Microgreen.	ς
	Name of Lim	ited Liability Company	<del></del>
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corre	spondence concerning this matter	to the following:	
	Danie	L D. CABALLORO	· · · · · · · · · · · · · · · · · · ·
	Dadegre	eens live micro Firm/Company	ABALLERO of Person  LIVE MI COGRENS  Lompany  Lome Superior (10)  Agent Superior (10)  Aller
	<u>6835 Rue</u>	versaules apt	10/
	Mani.	Beaut Fr 33441	
	Dadegreens a	Gmail, Com to be used for future annual report no	tification)
For further informatio	n concerning this matter, please co		
Daniel	D. CABAUERO e of Person	at (305 ) 670 Area Code Daytii	10 - 1935 me Telephone Number
Enclosed is a check fo	r the following amount:		
☑ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy
<u>Malling Add</u> Registratio			ection
Division of	Corporations	Division of Co	orporations
P.O. Box 6	541	The Centre of	Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Dadegreens live micro	greens LLC
Dadegreevs Ure Microa (Name of the Limited Liability Common (A Florida Limited)	nany as it now appears on our records.) I Liability Company)
The Articles of Organization for this Limited Liability Compan Florida document number <u>L 19 00 283858</u> .	y were filed on 11/26/2019 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lia	bility company here:
DANCELLY LLC	
The new name must be distinguishable and contain the words "Limited Liab	bility Company," the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	925 Federal STREET
	925 FEDERAL STREET CHATTANOOGA +N 37405
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	925 FERENZ STREET TO CHATTANOOGA TN 37405
	CHATTANOOGA TN 37405.
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address: /072	Enter Florida street address  Le PIN & S Florida 330 26  City Zip Code
Rembros	Le PINES Florida 33026
	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 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	MARCULE Almonte	925 Federal ST. Otallanooga TN 37405	CYAdd
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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	
If the date inserted in this block does not meet the applicable statutory fiment's effective date on the Department of State's records.	ling requirements, this date will not	be listed
,		
ord specifies a delayed effective date, but not an effective time, at 12:01 a.m.	on the earlier of: (b) The 90th do	v after ti
filed.		
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d 3/4/2022		
d 3/4/2022		
d 3/4/2022 . Signature of a member or authorized representat		