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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : COMPUTERSHARE Account Number : 110432003053 Phone : (561)694-8107 : (561)214-8442 Fax Number

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

Émail	Address:			

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN FARM STORES TO YOU FL, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

T. LEMIEUX

NOV-1-7 2023

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FARM STORES TO YOU FL. LLC		
(Name of the Limited Li (A Fl	ability Company as it now appears on o orida Limited Liability Company)	ur records.)
The Articles of Organization for this Limited Liabili Florida document number L20000335437	ity Company were filed on 10/30/20	20 and assigned
This amendment is submitted to amend the following	Enter Florida street address Enter Florida street address Florida	
A. If amending name, enter the new name of the	limited liability company here:	
IGFF Services LLC		
The new name must be distinguishable and contain the words	"Limited Liability Company," the designa	tion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	, ,	
(Principal office address MUST BE A STREET AL	DDRESS)	
		23 23 23
Enter new mailing address, if applicable:		بين.
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>	<u> </u>
B. If amending the registered agent and/or regist agent and/or the new registered office address he		ls, enter the name of the new registere
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida st	reet address
-	City	, Florida 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>	Name	Address	Type of Action
			□Add
			□ Remove
			☐ Change
			□Add
			□Remove
			□Change
			□Add
		 .	
			□Change
	·····	 	□Add
			☐ Remove
			□Change
			□Add
			□Remove
			Change
····			□Add

If amending any other inform	mation, enter change(s) here: (Attach additional sheets, if necessary.)	
		
		
		
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	must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuan block does not meet the applicable statutory filing requirements, this date will not	
e record specifies a delayed effec rd is filed.	ctive date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th de	ay after the
Dated	2023	
	Signature of a member or authorized representative of a member	
-	Signature of a member or authorized representative of a member	
Ariana Turoski, Spec	rial Manager	
	Typed or printed name of signee	

Filing Fee: \$25.00