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SECRETARY OF STORE

B McKNIGHT

COVER LETTER

TO: Registration Se Division of Cor						
SUBJECT: AGRC	officera Alca	auni LLC				
SUBJECT: / IGE		ited Liability Company				
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please return all correspo	ondence concerning this matter	to the following:				
	Aquiles	Love to Name of Person		-		
	AGROPECIA		<u>l</u>		2022	
		Firm/Company			2022 JUN	 1
	1438 Shad	aw CREEK DR	-		- - - (⊙	<u> </u>
		Address			"() K	İT
	ORALLE Pa	2K FL 32065			$\ddot{\mathcal{S}}$	Ü
		City/State and Zip Code		• :	دی دی	
	ALOREHOACA	Guail.com	 			
		to be used for future annual report notif	ication)			
For further information c	oncerning this matter, please c	all:				
Apriles La	oreto	a (832) 603	-1833			
Name o	f Person	Area Code Daytimo	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)	S60.00 Fi Certifica Certified (additional	te of Stat Copy	tus &	
Mailing Addres	<u>s:</u>	Street Address:				
Registration S	Section	Registration Sec				
Division of C P.O. Box 632	-	Division of Corp The Centre of T				
Tallahassee, I		2415 N. Monroe		10		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AGROPECTURE A A COLORVOL 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 TEbruary	21,7027 and assigned		
Florida document number 12200083060				
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 Liabi	lity Company," the designation "I	J.C" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:		.:. 2		
(Principal office address MUST BE A STREET ADDRESS))22, E.C.		
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)	address MAY BE A POST OFFICE BOX)			
		: X		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, <u>en</u>	ter the name of the new register		
New Registered Office Address:				
	Enter Florida street add	dress		
		Florida Zip Code		
No. Design I American Street and Street I American Design I American	·	гар Соли		
New Registered Agent's Signature, if changing Registered Agents		Construction of the second of		
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete				

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with 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
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	1438 Shadaw Creech The Orange Park FL 32065	□Remove	
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II ame	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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recor Lis fil	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the led.
ated .	Have 09 2022
	Signature of a member that have been depresentative of a member
	Agoiles Locato Typed or printed name of signee