

8/1/2019

Division of Corporations

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Florida Department of State
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
TOMMY GREENE FARMS, LLC

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COVER LETTER

(((HL9000230531 3)))

**TO: Registration Section
Division of Corporations**

SUBJECT: TOMMY GREENE FARMS, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fec(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

EMERALD GREENE PARSONS
Name of Person
TOMMY GREENE FARMS, LLC
Firm/Company
1695 SOUTH SR 53
Address
MADISON, FLORIDA 32340
City/State and Zip Code
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

EMERALD GREENE PARSONS at (850) 973-4141
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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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**AMENDED AND RESTATED ARTICLES OF ORGANIZATION
OF
TOMMY GREENE FARMS, LLC**

The undersigned subscriber to these Amended and Restated Articles of Organization, a natural person, competent to contract, hereby execute these Amended and Restated Articles of Organization for the purpose of amending the Articles of Organization for TOMMY GREENE FARMS, LLC, a Florida limited liability company. Filed on February 7, 2007 and assigned Document Number L07000014050.

ARTICLE I.

The name of this limited liability company is TOMMY GREENE FARMS, LLC.

ARTICLE II.

The period of duration for this limited liability company shall be perpetual.

ARTICLE III.

The mailing address and street address of the principal office of this limited liability company is 1695 S. SR 53, Madison, Florida 32340.

ARTICLE IV.

The name and street address of the initial registered agent of this limited liability company is EMERALD GREENE PARSONS, 1695 S. SR 53, Madison, Florida 32340.

ARTICLE V.

The only member of this limited liability company is the Trustee of the THOMAS HARVEY GREENE, JR. LIVING TRUST, dated June 29, 2006. The members of this limited liability company may admit additional members to this limited liability company by unanimous vote of the members of this limited liability company.

ARTICLE VI.

The remaining members of this limited liability company shall have the right to continue the business of this limited liability company on the death, retirement, resignation, expulsion, bankruptcy, or

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dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in this limited liability company.

ARTICLE VII.

This limited liability company shall be a manager managed company, and the Manager shall be EMERALD GREENE PARSONS.

IN WITNESS WHEREOF, the said Manager has hereunto set his hand and seal this 31st day of July, 2019.

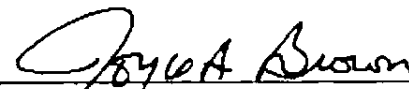

EMERALD GREENE PARSONS, Manager

STATE OF FLORIDA
COUNTY OF MADISON

I HEREBY CERTIFY that on this day before me, an officer duly authorized in the State and County named above to take acknowledgments, personally appeared EMERALD GREENE PARSONS, before me known to be the person described as the Manager of TOMMY GREENE FARMS, LLC, and who executed the foregoing Amended and Restated Articles of Organization, and acknowledged before me that he subscribed to these Amended and Restated Articles of Organization.

WITNESS my hand official seal in the County and State named above this 31st day of July, 2019.

My Commission Expires:


Notary Public



JOYCE A. BROWN
Notary Public, State of Florida
My Comm. Expires Feb. 8, 2022
Commission No. GG168443

NOTARY PUBLIC
STATE OF FLORIDA

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CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE
FOR THE SERVICE OR PROCESS WITHIN FLORIDA,
NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

In compliance with Chapter 605 and /or Chapter 621, Florida Statutes, the following is submitted:


TOMMY GREENE FARMS, LLC, with its principal place of business at 1695 S. SR 53, Madison, Florida 32340, names EMERALD GREENE PARSONS, whose address is Post Office Box 427, Madison, Florida 32341, and whose street address is 1695 S. SR 53, Madison, Florida 32340, as its registered agent to accept service of process within Florida, and for such other purposes as required for registered agents.

TOMMY GREENE FARMS, LLC

By: 
EMERALD GREENE PARSONS, as Manager

Dated: July 31, 2019

Having been named to accept service of process for the above named limited liability company, at the place designated in this Certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties. I am familiar with, and accept the obligations of registered agent.


EMERALD GREENE PARSONS
Registered Agent

Dated: July 31, 2019

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