

# LO7 000026380

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

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PICK-UP

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MAIL

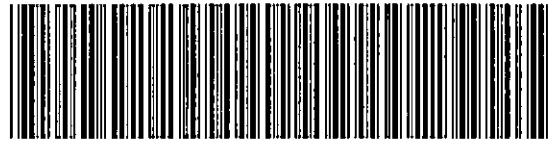
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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①

TO: Registration Section  
Division of Corporations

SUBJECT: Totally Tropical, LLC name change  
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Tracy Tucker  
Name of Person

(Totally Tropical, LLC previous) change (Navarre Farmers' Market, LLC  
Firm/Company  
New name

7681 North Shores Dr  
Address

Navarre, FL 32566  
City/State and Zip Code

combsofhoney@aimail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tracy Tucker at (850) 292-4630  
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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

②

TO  
ARTICLES OF ORGANIZATION  
OF

Totally Tropical, 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 28, 2007 and assigned  
Florida document number L-07000026380

This amendment is submitted to amend the following:

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

Navarre Farmers' Market, LLC

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:

**(Principal office address MUST BE A STREET ADDRESS)**

NA/Same

Enter new mailing address, if applicable:

**(Mailing address MAY BE A POST OFFICE BOX)**

NA/Same

**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:

Same

New Registered Office Address:

Same

Enter Florida street address

Florida

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.*

NA

If Changing Registered Agent, Signature of New Registered Agent

③

**AMBR = Authorized Member**

Type of Action

☐ Change

(4)

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

NA (change on name)

E. Effective date, if other than the date of filing: Filing date (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)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated January 13, 2020.

Mary John

Signature of a member or authorized representative of a member

Tracy Tucker

Typed or printed name of signee