

LO8000065246

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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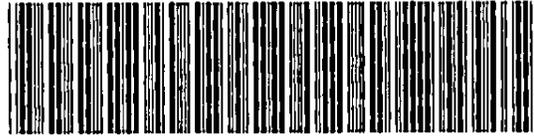
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE FL

11/13/20

On

# COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: SHEFFIELD FAMILY FARMS, LLC  
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:

LAURA SHEFFIELD  
Name of Person  
SHEFFIELD FAMILY FARMS, LLC  
Firm/Company  
3423 SOUTHCREST BLVD  
Address  
LAKELAND, FL 33812  
City/State and Zip Code  
LSHEFFIELD1@VERIZON.NET  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LAURA SHEFFIELD 863 647-2827  
Name of Person at (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

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

FILED

2020 NOV 13 PM 4: 49

SHEFFIELD FAMILY FARMS, LLC

SECRETARY OF STATE  
TALLAHASSEE, FL

~~(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 07/07/2008 and assigned Florida document number L08000065246.

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 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)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**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:

\_\_\_\_\_

New Registered Office Address:

\_\_\_\_\_

*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.*

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>	<u>Address</u>	<u>Type of Action</u>	
S. T	LAURA SHEFFIELD	3423 SOUTHCREST BLVD	<input checked="" type="checkbox"/> Add	
		LAKELAND, FL 33812	<input type="checkbox"/> Remove	
			<input type="checkbox"/> Change	
	HENRY L. SHEFFIELD	209 MILL RUN EAST	<input type="checkbox"/> Add	
		BRADENTON, FL 34212	<input checked="" type="checkbox"/> Remove	
			<input checked="" type="checkbox"/> Change	
MGR	LANNY M. SHEFFIELD	3423 SOUTHCREST BLVD	<input type="checkbox"/> Add	
		LAKELAND, FL 33812	<input type="checkbox"/> Remove	
			<input checked="" type="checkbox"/> Change	
AMBR	MARLIN R. SHEFFIELD	3423 SOUTHCREST BLVD	<input type="checkbox"/> Add	
		LAKELAND, FL 33812	<input type="checkbox"/> Remove	
			<input type="checkbox"/> Change	
				<input type="checkbox"/> Add
				<input type="checkbox"/> Remove
				<input type="checkbox"/> Change
			<input type="checkbox"/> Add	
			<input type="checkbox"/> Remove	
			<input type="checkbox"/> Change	

