#109000076303

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(englesates) notice in
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EXAMINER
MAR 3 0 2011

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Florida (Name of Limited Lia)	bility Company)	LLC
The enclosed member, managing member or managiling.	ger resignation and fee(s)) are submitted for
Please return all correspondence concerning this ma	atter to:	
ANgela Wilcox (Contact Person)		
Florida Creamery (Firm/Company)		
1629 Charon Bd (Address)		
Jack sonville Florida (City/State and Zip Code)	a 32205	
For further information concerning this matter, plea	ise call:	
(Name of Contact Person) at (Ar	904) 619-5 rea Code & Daytime Telepl	386 hone Number)
Enclosed please find a check made payable to the F \$25 Filing Fee	Torida Department of Sta \$55 Filing Fee & Certified Copy	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING AD Registration Sec Division of Corp P.O. Box 6327 Tallahassee, Flo	etion porations

CR2E079 (5/06)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILE

	Or		11.	
· ·	0.750		11 MAR 28 AM II: OE	
FLOF	RIDA CREAMERY	LLC	$^{-2k_{\rm e}}_{\rm KM}$	
(<u>Name of the Limited</u>	RIDA CREAMERY Liability Company as it now apper Florida Limited Liability Company	e <u>ars on our records</u> ')	AM II: OE STEAM SSEE, MORIDA	
		i	, MORIO	
The Articles of Organization for this Limited Lia	ability Company were filed on _	10 5	2009 and assigned	
Florida document numberL090000	296303	·		
This amendment is submitted to amend the follo	wino [.]			
	····· o ·			
A. If amending name, enter the new name of	the limited liability company h	<u>ere</u> :		
•				
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Com	pany," the designati	on "LLC" or the abbreviation	
Enter new principal offices address, if applica	ble· S	ane		
(Principal office address MUST BE A STREET				
Tructput office unuress MOSI BE A STREET	ADDICESSI			
Enter new mailing address, if applicable:		Same		
Mailing address MAY BE A POST OFFICE E	<u></u>		····	
	****	···		
B. If amending the registered agent and/o		our records, <u>ent</u>	ter the name of the new	
registered agent and/or the new registered off	ice address here:			
		A . 9		
Name of New Registered Agent:	(Same person)	Angela	MILCOX	
New Registered Office Address:	(Same person)	Formurly	Sasser	
THE TABLEST OTHER TRACES.		Enter Florida street		
		, 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 608, 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.

It Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records: MGR = Månager' MGRM = Managing Member **Address** Type of Action **Title** <u>Name</u> Remove ☐ Add ☐ Remove Add Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) was Angela wilcox for last 20+ years-used briefly to angela Susser - NOW I'm

Signature of a member or authorized representative of a member

Angela L Wilco X

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00