

L10000089222

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

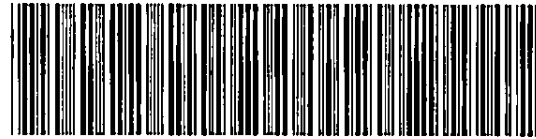
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2017 NOV - 7 PM 2:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
NOV - 8 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GLOBAL NATURAL FARMVILLE
Name of the stockholder(s) or agent

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

JESUS RIVAS ARIAS
Name of Person
GLOBAL NATURAL FARMVILLE
Name of Corp.
6427 PEMBROKE ROAD
Address
HOUSTON TEXAS 77061
City, State, Zip
JIMENEZ/ALONDINO/CHIMEL
Can be called for information regarding this filing

For further information concerning this matter, please call:

JESUS RIVAS ARIAS
Name of Person 813-437-1111
Address City, State, Zip

Enclosed is a check for the following amount:

- | | | | |
|--|---|---|---|
| ☒ \$25.00 Filing Fee | ☐ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certificate of Copy | ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy |
|--|---|---|---|

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32311

STREET OR RAIL ADDRESS:
825 North
Division of Corporations
Tallahassee, FL 32311
Tallahassee, FL 32311
Tallahassee, FL 32311

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION

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TALLAHASSEE, FLORIDA

GLOBAL NATURAL FARMS LLC

(Name of the Limited Liability Company as in the original certificate of formation)

The Articles of Organization for this Limited Liability Company were filed on 07-25-2017

at 11:00:00 AM

Florida document number L10000089222

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" or "LLC".

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 in our records, enter his name and new registered agent and/or the new registered office address here:

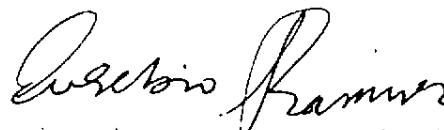
Name of New Registered Agent: FRANCISCO MARTINEZ

New Registered Office Address: 6477 OLIVERA ROAD

HOUSTON TEXAS 77057 Phone: 281-221-3333

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act as the agent of the other signers of this amendment to the provisions of all statutes relative to the proper and complete performance of the duties and obligations of my position as registered agent as provided for in the laws of the State of Florida, and I agree that the foregoing statements and declarations being filed, accurately reflect all changes in the registered office and agent information for this company and that the said company has been notified in writing of this change.



(If Changing Registered Agent, Signature of New Registered Agent)

D. If amending any other information, enter change(s) here: *Don't delete the statute, if necessary.*

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TALLAHASSEE, FLORIDA

F. Effective date, if other than the date of filing: _____ (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 the filing date, unless otherwise noted.

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be noted 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 OCTOBER 27TH

2011

Signature of the person who executed the record

JESUS RIVAS ARIAS