

L110000 61380

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

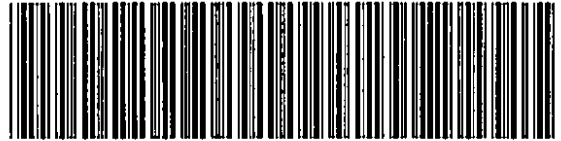
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/13/19--01025--007 **25.00

SEP 13 2019 10:41 AM
CLERK/REGISTRATION

SEP 13 2019 10:41 AM

SEP 13 2019

SEP 25 2019
Clerk/REGISTRATION

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Townsend Honey Farm LLC
Name of Limited Liability Company

2009 SEP 13 AM 10:44
TALLAHASSEE, FL 32301
DIVISION OF CORPORATIONS

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

Please return all correspondence concerning this matter to the following:

LeeAnn Townsend

Name of Person

Townsend Honey Farm LLC

Firm/Company

10583 SE 38th Ave

Address

Starke, FL 32091

City/State and Zip Code

LeeAnn@TownsendHoneyFarm.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LeeAnn Townsend

Name of Person

at (352) 235-2984

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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Townsend Honey Farm LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

2011 SEP 13 AM 10:45
FILED
CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF
DADE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 5/25/2011 and assigned
Florida document number L11000061380.

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>
President	Taylor S. James	10203 Pineland Dr.	☐ Add
		Hampton, FL 32044	☒ Remove;
			☐ Change
VP	Waylon A. Townsend	10583 SE 38 th Ave	☐ Add
		Starke, FL 32091	☐ Remove
		Director of Operations	☒ Change
President	Carrie A. Townsend	10583 SE 38 th Ave	☐ Add
		Starke, FL 32091	☐ Remove
		VP	☒ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

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

Blank lined area for amendments.

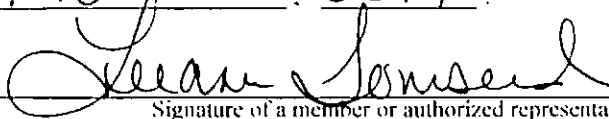
E. Effective date, if other than the date of filing: _____ (optional)

(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 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 Sept. 10, 2019.



Signature of a member or authorized representative of a member

LeeAnn Townsend

Typed or printed name of signee