L12000036215



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Office Use Only

COVER LETTER

١	Division of Corporations
	WARREN RENEWAL AGRICULTURAL SERVICES, L
30 3 020	Name of Limited Liability Company
The enclo	sed Articles of Amendment and fee(s) are submitted for filing.
Please ret	urn all correspondence concerning this matter to the following:

2013 JUL -8 PM 38 37

Mellie Barker

Name of Person

J & J Accounting & Payroll Service, Inc

Firm/Company

P O Box 1875

Address

Dundee, Fl 33838

City/State and Zip Code

jaccount@tampabay.rr.com

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

For further information concerning this matter, please call:

Charles Warren

TO: . Registration Section

863 559-7845

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)

2

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

Warren Renewal Agriculti		53	
(Name of the Limite	d Liability Company as it now ap A Florida Limited Liability Compa	pears on our records.)	
(A Florida Emilied Elability Compai	(y)	
The Articles of Organization for this Limited I	Liability Company were filed on	March 14, 2012	
Florida document number L12000036215		and assigned	
Fiorida document number 2 1200000210	·		
This amendment is submitted to amend the fol	lowing:	<u> </u>	
A If amonding name ontouthe non-	. C. A 15 14 A. H B. 114	1 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	
A. If amending name, enter the new name	of the limited hability company	here:	
The new name must be distinguishable and end w "L.L.C."	ith the words "Limited Liability Co	mpany," the designation "LLC" or the abbreviation	
L.L.C.			
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STRE	ET ADDRESS)		
<u> </u>	<u> </u>		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	(BOX)		
	-		
R If amanding the registered egent and	/an magistaned office address o	n our records, enter the name of the new	
registered agent and/or the new registered o	or registered office address (n our records, enter the name of the new	
	Charles Warren		
Name of New Registered Agent:	tered Agent: Charles vvarren		
New Registered Office Address:	330 W Lake Otis Dr		
	<u> </u>	Enter Florida street address	
	Winter Haven	, Florida 33880	
	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.

If 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 = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Jared Warren	330 Lake Otis Dr SE	Add
		Winter Haven, FI 33880	Remove
			_
			Add
			Remove
			_
			Add
			Remove
			Add Add
			Remove
	•		
			Add
			Remove
			_
			Add
			Remove

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Filing Fee: \$25.00

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