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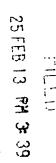
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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COVER LETTER

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R SUBJECT:	Rich & Sist	ers, LLC					
Name of Limited Liability Company							
The enclosed A	Articles of a	Amendment and fee(s) are sub	mitted for filing.				
Please return a	ll correspo	ndence concerning this matter	to the following:				
		Michael Swindle					
		•	Name of Person				
		Pearl Farms, LLC					
			Firm/Company				
		7500 West US Hwy 27					
			Address				
		Clewiston, FL 33440					
		amy@swindlecpa.com	City/State and Zip Code				
		E-mail address: (to be used for future annual report notifi	ication)			
For further info	ormation co	oncerning this matter, please co	ıll:				
Michael Swind	dle		863 228-0145				
	Name of	Person	at () Area Code Daytime	Telephone Number			
Enclosed is a c	heck for th	e following amount:					
□ \$25.00 Fili	ing 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

Rich & Sisters, LLC		
(<u>Name of the Limited Liability</u> (A Florida L	Company as it now appears on our records.) imited Liability Company)	
The Articles of Organization for this Limited Liability Cor	mpany were filed on December 21, 2012	and assigned
Florida document number L12000159651	÷	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	
Pearl Farms, LLC		
The new name must be distinguishable and contain the words "Limite	d Liability Company," the designation "LLC" or the	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable:		 ,
(Principal office address MUST BE A STREET ADDRE	<u> </u>	
		25
Enter new mailing address, if applicable:		- T
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
		<u> </u>
	-	3 9
B. If amending the registered agent and/or registered o	office address on our records, <u>enter the r</u>	name of the new registere
agent and/or the new registered office address here:		# 39 **
		•
Name of New Registered Agent:		
New Registered Office Address:		
The writing the state of the st	Enter Florida street address	
	, Florida	ı
	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>	Address	Type of Action
			□Add
			□ Remove
			□Change
			□Add
-			□Remove
			□Change
			🗆 Add
			□Remove
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ffective date, if other than the date an effective date is listed, the date must be lote: If the date inserted in this block ocument's effective date on the Department.	specific and cannot be p does not meet the ap	plicable statutory f		r filing.) Pursuant to 605.01	
record specifies a delayed effective da Lis filed.	ite, but not an effectiv	e time, at 12:01 a.	m, on the earlier of: (b) The 90th day after the	he
February 10	2025	·			
Mukael					

Filing Fee: \$25.00