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(Cit	ty/State/Zip/Phone #	<u>) </u>
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CORPORATIO	ON NAME(S) & DOCUMENT NUM	IBER(S), (if known):		
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	(Corporation Name)	id 1 	(Document#)	
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COVER LETTER

TO: Registration 3 Division of Co					
Virtuou	s Farms, LLC				
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	of Amendment and fee(s) are sub	omitted for filing.			
Please return all corres	pondence concerning this matter	to the following:			
	Garvin B. Bowden				
		Name of Person			
	Gardner, Bist, Wien	er, Bowden, Bush, et al.			
		Firm/Company			
	1300 Thomaswood	Drive		70 2	
	·	Address		2015 JAN SEGREU TALLAHA	7
	Tallahassee, Florida	a 32308		AN -7 E IARY HASS	********
	garvin@gbwlegal.co	City/State and Zip Code		mo 🥦	L.
		to be used for future annual report notif	lication)	AM 9: 37 OF STATE E FLORIDA	The same
For further information	concerning this matter, please c	all:		37 19A	
Garvin B. Bowde	n	850 385-0070			
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)	Certified	te of Status &	

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

Virtuous Farms, LLC (Name of the Limite)	d Liability Compa A Florida Limited I	ny as it now appears on our reco lability Company)	rds.)		
The Articles of Organization for this Limited List Florida document number <u>L13000009378</u>	ability Company	were filed on January 18,	, 2013	and assig	gned
This amendment is submitted to amend the follo	wing:				
A. If amending name, enter the new name of	the limited liabi	lity company here:			
Mill Branch Cattle Company, LLC					
The new name must be distinguishable and end with the v	vords "Limited Liab	ility Company," the designation "I	LLC" or the ab	breviation "L.	L.C."
Enter new principal offices address, if applica	ıble:	1488 Buddy Acres Ro	oad		
(Principal office address MUST BE A STREE		Jacksonville, FL 3223	34 =	20	
			ŗ	2015 J	77
Enter new mailing address, if applicable:		1488 Buddy Acres Ro	oad	N - 7	
(Mailing address MAY BE A POST OFFICE)	8 <i>0X</i>)	Jacksonville, FL 3223	34		111
B. If amending the registered agent and/oregistered agent and/or the new registered of	or registered of		ds, <u>enter t</u>	9: 37 S 1ATE L OHIO.A	f the new
Name of New Registered Agent:	Garvin B. B	owden			
New Registered Office Address:	1300 Thoma	aswood Drive			
		Enter Florida street add	ress		
	Tallahassee) ,,]	Florida 32	308	
		City		Zip Code	
New Registered Agent's Signature, if changing R	legistered Agent:				
I hereby accept the appointment as registered provisions of all statutes relative to the prope accept the obligations of my position as regis being filed to merely reflect a change in the recompany has been notified in writing of this company has been notified in writing of the company the company has been notified in writing of the company th	er and complete stered agent as p registered office	performance of my duties, provided for in Chapter 60:	and I am fo 5, F.S. Or, i	amiliar with if this docum	n and nent is

Page 1 of 3

If Changing Registered agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
Pres	Christopher P. Johnson	1488 Buddy Acres Road	Add
		Jacksonville, FL 32234	Remove
MGRM	Andrew M. Sutter	833 Watercress Court	
		Saint Johns, FL 32259	Remove
MGRM	John Chick, Jr.	1836 Lochamy Lane	
		Saint Johns, FL 32259	■ Remove
			2015 JAN & AMOVE 37 SE SRETARY OF GIATE IALLIAHASSEE FLORIDA
			Add
			Remove
			Add
			Remove

f amending any other informatio	n, enter change(s) here: (Attoch ada	itional sheets, if necessary.)
		territoria de la composición del composición de la composición del composición de la
Mective date, if other than the de the effective date must be specific, cannot the date this document is filed by the Florid	nte of filing: be prior to date of receipt or filed date and car da Department of State)	(optional)
ted January 6	2015	
	~ 7_	
	gnature of a member or authorized represer	native of a member
Christopher P. John	son /	
	Typed or printed name of sig	nec.

Page 3 of 3

Filing Fee: \$25.00

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SCURETARY OF STATE
TALLAHASSEE FI STATE