### Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LAW OFFICE OF PAUL A. KRASKER, P.A

Account Number : 120090000078

Phone : (561)801-7312

Fax Number : (561)515-3904

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please

### LLC AMND/RESTATE/CORRECT OR M/MG RESIGN YEE INVESTMENTS, LLC

Certificate of Status	1
Certified Copy	0
Page Count	05
Estimated Charge	\$30.00

Registration Section

Tallahassee, FL 32314

TQ:

#### **COVER LETTER**

Division of Corporations YEE INVESTMENTS, LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: PAUL A. KRASKER, ESQ. Name of Person THE LAW OFFICE OF PAUL A. KRASKER, P.A. Firm/Company 1615 FORUM PLACE, 5TH FLOOR Address WEST PALM BEACH, FL 33401 City/State and Zip Code PKRASKER@KRASKERLAW.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: ANDREA MURPHY Daytime Telephone Number Name of Person Enclosed is a check for the following amount: \$30.00 Filing Fee & Certificate of Status ☐ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status & Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed) Street Address: Mailing Address: Registration Section Registration Section **Division of Corporations** Division of Corporations The Centre of Tallahassee P.O. Box 6327

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

# MJ000000616023

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limit	ted Liability Company as It now appears on (A Florida Limited Liability Company)	our records.)
The Articles of Organization for this Limited L Florida document number L13000176165	iability Company were filed on DECE.	MBER 23, 2013 and assigned
This amendment is submitted to amend the following	owing:	
A. If amending name, enter the new name o	f the limited liability company here:	
YEE FAMILY FARMS, LLC		
The new name must be distinguishable and contain the v	words "Limited Liability Company," the design	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic		
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE	BOX)	2000 JAH
B. If amending the registered agent and/or agent and/or the new registered office addre		rds, enter the name of the new registere
Name of New Registered Agent:	THE LAW OFFICE OF PAUL A. KI	RASKER, P.A.
New Registered Office Address:	1615 FORUM PLACE, 5TH FLOOR	
	Enter Florida	street address
	WEST PALM BEACH	, Florida 33401
	Citv	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

4200000014423

## NJ222020011033

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
MGR	THOMAS YEE	1469 Sailboat Circle	
		Wellington, FL 33414	□Remove
			<b>⊟</b> Change
MGR	NANCY C. YEE	1469 Sailboat Circle	□Add
		Wellington, FL 33414	
			■Change
MGR I	ETHAN T. YEE	1469 Mantova Bay Circle	
		Boynton Beach, FL 33473	□Remove
			■Change
MGR —	ROLAND T. YEE	12410 SW Keating Drive	□Add
		Port St. Lucic, FL 34987	□Remove
		<del></del>	□Add
		<del></del>	□Remove
			Change
		<del></del>	□Add
			□Remove
			Change

## 420000061623

mendin	ing any other information, enter change(s) here: (Attach additional sheets, if nocessary.)	
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Effective (fai effec <u>Note:</u> II documen	(optional)  ve date, if other than the date of filing:  cuive due is listed, the due must be specific and person be prior to due of filing or more than 90 days after filing.)  If the date inserted in this block does not meet the applicable statutory filing requirements, this date were's effective date on the Department of State's records.	Pursuant to 605.05 will not be listed
se record and is file	of specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of, (b). The	: 90th day after t
Dated_	Neverter 20 . 2019.	
	Shortest of Thembel of enthurbed representative of a mumber	<del></del>

Filing Fee: \$25.00.