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Registration Section

Division of Corporations

TO:

SUBJECT:	BAILEY	' FARMS LLC	
Sobret.	Name of Lim	nited Liability Company	
The enclosed Articles of A	mendment and fee(s) are sub	omitted for filing.	
Please return all correspond	dence concerning this matter	to the following:	
	Jo	OSHUA C. DURST, CPA	
		Name of Person	
	D	JOSHUA C. DURST, CPA Name of Person DURST JORDAN, CPA, PA Firm/Company 4459-B HIGHWAY 90 Address PACE, FL 32571 City/State and Zip Code STAFF@DURSTJORDAN.COM all address: (to be used for future annual report notification) er, please call: 850 995-5000 at (
	Firm/Company		
		4459-B HIGHWAY 90	
		Address	
		PACE, FL 32571	
		City/State and Zip Code	
	STA	.FF@DURSTJORDAN.COM	
	E-mail address: (to be used for future annual report notif	fication)
For further information cor	ncerning this matter, please c	all:	
JOSHUA C. DURST, CPA	\		
Name of I	Person		e Telephone Number
Enclosed is a check for the	following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy
Mailing Address: Registration So Division of Co P.O. Box 6327 Tallahassee, FI	ection rporations	Registration Sec Division of Corp The Centre of T	porations allahassee e Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BLACKWATER RIVI	ER BOYS LLC	
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed onFEBRUARY 4, 2014	and assigned
Florida document numberL14000019256		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
BAILEY FARMS LLC A & G BAILEY FARMS LLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:	ATTN: ANTHONY BAILEY	
Principal office address MUST BE A STREET ADDRESS)	8690 GIN ROAD	
	PACE, FL 32571	
		; 2p ('6 '2 , 4
Enter new mailing address, if applicable:	ATTN: ANTHONY BAILEY	
Mailing address MAY BE A POST OFFICE BOX)	8690 GIN ROAD	ró
	PACE, FL 32571	
		<u> </u>
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the nam	• •
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>	Type of Action
MGRM	ANTHONY D. BAILEY	8690 GIN ROAD	
		PACE, FL 32571	
			■ Change
MGRM	GLORIA G. BAILEY	8690 GIN ROAD	
		PACE. FL 32571	□Remove
			□Add
			Add
			≥ □Remove
			⊃ □ Change
			□Add
			□Remove
			Change
		<u> </u>	□Add
			Remove

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antina data if ather than the d	ato of Alina	(optional	N
ective date, if other than the dieffective date is listed, the date must be	e specific and cannot be prior to date	of filing or more than 90 days after filin	g.) Pursuant to 605.020
te: If the date inserted in this bloc ument's effective date on the Dep		atutory filing requirements, this dat	e will not be listed a
	date, but not an effective time, at	12:01 a.m. on the earlier of: (b)	The 90th day after the
s filed.			
AUGUST 18	2021		
ded // / /	· /		
/ <u> </u>	1		

Typed or printed name of signee