## 14000102034

(Requestor's Name)		
(Address)		
(Ac	idress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
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**B FIGUEROA** JAN 3 0 2018

## COVER LETTER

Division of Corp				
SUBJECT: 50	Vage Daks Name of Limit	Cattle Company	, uc	
The enclosed Articles of A	mendment and fee(s) are subn	nitted for filing.		
Please return all correspon	dence concerning this matter to	o the following:		
		Name of Person  Oaks Carrier Company		LLC
		? . R . 634 Address		
		Florida City/State and Zip Code Savageoaks be used for future annual		
	E-mail address: (to	SavageDaks  be used for future annual	cattle. (	<u>com</u>
For further information cor	ncerning this matter, please cal	II:		
Travis H.	alley Person	at ( <u>3.52</u> ) Area Code	568-73 Daytime Telephor	76 ne Number
Enclosed is a check for the	following amount:			
\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee of Certified Copy (additional copy is en		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Registra Division P.O. Box	NG ADDRESS: tion Section of Corporations c 6327 see. FL 32314	Registrat Division Clifton H 2661 Ex	r/COURIER ADD ion Section of Corporations building ecutive Center Circ sec. FL 32301	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Savage Daks Ca	ttle, LLC	
(Name of the Limited Liability Company as it no (A Florida Limited Liability Co	w appears on our records.) on pany)	
The Articles of Organization for this Limited Liability Company were file Florida document number $\underline{L14000102034}$ .	d on $\frac{\omega/25/2014}{}$ and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability com	pany here:	
The new name must be distinguishable and contain the words "Limited Liability Compar	ny," the designation "L.L.C." or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		-
		-
Enter new mailing address, if applicable:		_
(Mailing address MAY BE A POST OFFICE BOX)		_
B. If amending the registered agent and/or registered office add registered agent and/or the new registered office address here:	ress on our records, enter the name of the results of the party of the	<u>1ew</u>
Name of New Registered Agent:	70 20 C	: :
New Registered Office Address:	Enter Florida street address	-
City	Florida	-
New Registered Agent's Signature, if changing Registered Agent:	inp couc	
I hereby accept the appointment as registered agent and agree to act provisions of all statutes relative to the proper and complete performaccept the obligations of my position as registered agent as provided being filed to merely reflect a change in the registered office address, company has been notified in writing of this change.	ance of my duties, and I am familiar with and for in Chapter 605, F.S. Or, if this document is	

If Changing Registered Agent, Signature of New Registered Agent

	Authorized Person(s) authorized to ma from our records:	nage, <u>enter the tit</u>	e, name, and address of each	person being added
MGR = M AMBR = A	anager uthorized Member			
<u>Title</u>	<u>Name</u>	Address		Type of Action
AMBR	FeliciaHalley	<u>5653 (</u>	R. 634 South	j <b>z</b> f Add
		Bushnell	,FL .33:513	☐ Remove
				☐ Change
				🗆 Add
				Remove
				Change
				□ Add
		<del> </del>		□ Remove
		<del></del>		□ Change
	<del></del>			Add
				□ Remove
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				ISECRETA SECRETA
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				FILED STATE ISING OF CORPORATIONS  BAN 29-PH 12:366
		<del></del> _		□ Remove
				Change

amendi	ing any other information, enter change(s) here: (Attach ac	dditional sheets, if necessary.)
	<u>.</u>	
-		
	<u></u>	
effectiv te: If the	date, if other than the date of filing:  //e date is listed, the date must be specific and cannot be prior to date of filing the date inserted in this block does not meet the applicable statutory s effective date on the Department of State's records.	(optional) g or more than 90 days after filing.) Pursuant to 605.0207 filing requirements, this date will not be listed as
	d specifies a delayed effective date, but not an effect the day after the record is filed.	ive time, at 12:01 a.m. on the earlier o
ted	January 20, 2018.	
		Wise
	Signature of a member or authorized represer  Travis Halley Typed or printed name of sig	N 29
	Page 3 of 3	PM 12: 56
	Filing Fee: \$25.00	