# L14000102797

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

Office Use Only



600354443006

11/05/20--01020--027 \*\*25.00

S TALLENT DEC 14 2920

2729 NOV -5 Alt 9: 46

**Division of Corporations** HARVEST5 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: ANDREA ARBOLEDA GUTIERREZ Name of Person HARVEST5 INVESTMENTS, LLC Firm/Company 308 OAK SPRING DR Address DEBARY, FL 32713 City/State and Zip Code heredia.realtor@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: ANDREA ARBOLEDA GUTIERREZ 386 837-3396 Daytime Telephone Number Area Code Name of Person Enclosed is a check for the following amount: ☐ \$60.00 Filing Fee, **■** \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed) Mailing Address: Street 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

TO:

Registration Section

Tallahassee, FL 32314

## TO ARTICLES OF ORGANIZATION OF

(Name of the Limited I	Liability Compa Florida Limited I	ny as it now appears on our re liability Company)	ecords.)	
The Articles of Organization for this Limited Liabi lorida document number 1.14000102797		were filed on		and assigned
his amendment is submitted to amend the following	ng:			
A. If amending name, enter the new name of th	e limited liab	ility company here:		
he new name must be distinguishable and contain the word	s "Limited Liabil	lity Company," the designation	"LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)		308 OAK SPRING DR		
		DEBARY FL 32713		£72
Trincipal office maters wost be 71 STREET 7	<u>IDD RESSI</u>		•	(UN 623
				<del>ن</del> -
Enter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)		308 OAK SPRING DR		<u> </u>
		DEBARY FL 32713		9:14:
				146
3. If amending the registered agent and/or regingent and/or the new registered office address h	<u>iere</u> :	address on our records, <u>e</u> BOLEDA GUTIERREZ	nter the name	of the new reg
Name of New Registered Agent:	200 A VE CDD	INC IND		
New Registered Office Address:	308 OAK SPRI		11	
	DUD A DW	Enter Florida street a		
-	DEBARY		_, Florida <u> </u>	
		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.

Andrea Arboleda Cottemez
If Changing Registered Agent, Signature of New Registered Agent

# or removed from our records:

# MGR = Manager

### AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	ANDREA ARBOLEDA GUTIERF	308 OAK SPRING DR	■Add
		DEBARY FL 32713	
MGR	LUZ BIBIANA HEREDIA	308 OAK SPRING DR	
		DEBARY FL 32713	■Remove
			□Change
			□Add
			Remove
			□Change
			□Add
			□Remove
			☐ Change
			□Add
			□Remove
			□Change
		<del>.</del>	□Add
			□Remove
			□Change

				-
				<del></del>
		<del></del>		
	<del></del>			
	<del></del>			
<del></del>				<del></del>
				<del></del>
		<del></del>	<del> </del>	·····
	<del></del>	<u> </u>		
Effective date, if other than the (	11/02/20 date of filing:		(optional)	
f an effective date is listed, the date must	be specific and cannot be p	rior to date of filing or mor	e than 90 days after filing.) P	
			requirements, this date wi	ir not be listed as
Note: If the date inserted in this blo				
Note: If the date inserted in this blo				
Note: If the date inserted in this blo document's effective date on the De record specifies a delayed effective		e time, at 12:01 a.m. on	the earlier of: (b) The 9	Oth day after the
Note: If the date inserted in this blo document's effective date on the De record specifies a delayed effective		ve time, at 12:01 a.m. on	the earlier of: (b) The 9	Oth day after the
Note: If the date inserted in this blo document's effective date on the De erecord specifies a delayed effective d is filed.  NOVEMBER 02		ve time, at 12:01 a.m. on	the earlier of: (b) The 9	Oth day after the
Note: If the date inserted in this blo document's effective date on the De e record specifies a delayed effective d is filed.  NOVEMBER 02	date, but not an effective	·		Oth day after the
Note: If the date inserted in this blo document's effective date on the De record specifies a delayed effective d is filed.  NOVEMBER 02	date, but not an effective	·		Oth day after the
Note: If the date inserted in this blo document's effective date on the De e record specifies a delayed effective d is filed.  NOVEMBER 02 Dated	date, but not an effective	 Arbdeda	Gutienez	Oth day after the