

L14 000 157859

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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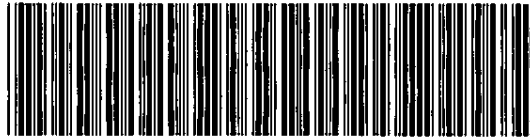
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Farmore LLC

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:

Anthony C. Cinelli

Name of Person

Farmore LLC

Firm/Company

13 Ellsworth Dr

Address

Palm Coast, FL 32164

City/State and Zip Code

KG4JSK@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Anthony C. Cinelli

904

424-8813

at ()

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)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

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**

Farmore LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on September 26, 2014 and assigned Florida document number L14000153859.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Farmore LLC

13 Ellsworth Dr

Palm Coast, FL 32164

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

Farmore LLC

13 Ellsworth Dr

Palm Coast, FL 32164

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Anthony C. Cinelli

New Registered Office Address:

13 Ellsworth Dr

Enter Florida street address

Palm Coast

City

, Florida

32164

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.

A. C. Cinelli

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Anthony C. Cinelli	Anthony C. Cinelli	<input checked="" type="checkbox"/> Add
		13 Ellsworth Dr.	<input type="checkbox"/> Remove
		Palm Coast, FL 32164	
AMBR	Angelo C. Cinelli	Angelo C. Cinelli	<input checked="" type="checkbox"/> Add
		204 S Oceanshore Blvd	<input type="checkbox"/> Remove
		Flagler Beach, FL 32136	
MGR	Angelo C. Cinelli	Angelo C. Cinelli	<input checked="" type="checkbox"/> Add
		204 S Oceanshore Blvd	<input type="checkbox"/> Remove
		Flagler Beach, FL 32136	
AMBR	Regina M Cinelli	Regina M Cinelli	<input type="checkbox"/> Add
		204 S Oceanshore Blvd	<input checked="" type="checkbox"/> Remove
		Flagler Beach, FL 32136	
MGR	Regina M Cinelli	Regina M Cinelli	<input type="checkbox"/> Add
		204 S Oceanshore Blvd	<input checked="" type="checkbox"/> Remove
		Flagler Beach, FL 32136	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

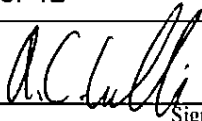
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ **(optional)**

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated December 12, 2014



Signature of a member or authorized representative of a member

Anthony C. Cinelli

Typed or printed name of signee

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Filing Fee: \$25.00

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