## L15000060891

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## COVER LETTER

TO: Registration Septi Division of Corpo			•
MFA Farm	Properties, LLC		
SUBJECT:	Name of Limited Liabi	lity Company	<del></del>
The enclosed Articles of Ar	nendment and fee(s) are submitted fo	or filing.	
Please return all correspond	lence concerning this matter to the fol	llowing:	
	L. Joseph Bodkin, III		
	Ne	ame of Person	*****
	LJB Investments & Funding	g	
	Fi	rm/Company	<del></del>
	4070 Ashmore Place		
	<del></del>	Address	<del></del>
	Pensacola, Florida 32503-	3430	
	City/St	ate and Zip Code	
	bodkinj@msn.com		
	E-mail address: (to be used	for future annual report notification)	<del></del>
For further information con	cerning this matter, please call:		
L. Joseph Bodkin, III		305 304-6193	
Name of P	erson	Area Code Daytime Telepho	one Number
Enclosed is a check for the	following amount:		
□ \$25.00 Filing Fee	Certificate of Status C	5.00 Filing Fee & ertified Copy dditional 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**

ARTICLES OI	FAMENDMENT	
· · · ·	ТО	<b>*</b>
ARTICLES OF	ORGANIZATION	15. 11 0
· · · · · · · · · · · · · · · · · · ·	OF	The App of the
		1907 13 D
MFA Farm Properties, LLC		PARIS
(Name of the Limited Liability Com (A Florida Limite	pany as it now appears on our reco	ords.)
(A Florida Limite	d Liability Company)	1677 CONTR.
The Articles of Organization for this Limited Liability Compar	www. filed on April 7, 201	5 and assigned
The Articles of Organization for this Elimited Elability Compar	ly were med on	and assigned
Florida document number L15000060891		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lis	ahility company here:	
A. If amending name, enter the new name of the numera ne	tompuny nove	
The new name must be distinguishable and end with the words "Limited Li	iability 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)		
m 4 11 18 18 18 18 18 18 18 18 18 18 18 18		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered		rds, enter the name of the n
registered agent and/or the new registered office address h	<u>ere</u> :	
Name of New Registered Agent:		
Limite of 1707 Translation Library		
New Registered Office Address:		
	Enter Florida street add	tress
		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 the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

<u>Title</u>	<u>Name</u>	Address	Type of Actio
AMBR	Donna S. Adams	4850 Alex Reed Trail	
		Pace, Florida 32571-1603	□ Remove
			□ Remove
<del></del>			□ Add
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Filing Fee: \$25.00