

L1500 0066891

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

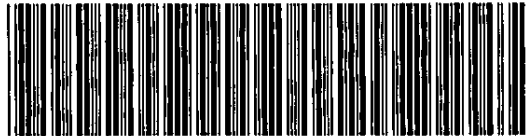
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900278513949

10/30/15--01024--010 **60.00

FILED
15 NOV - 2 AM 11:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOV - 3 2015

J SHIVERS

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: MFA Farm Properties, 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:

L. Joseph Bodkin, III

Name of Person

LJB Investments & Funding

Firm/Company

4070 Ashmore Place

Address

Pensacola, Florida 32503-3430

City/State and Zip Code

bodkinj@msn.com

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

For further information concerning this matter, please call:

L. Joseph Bodkin, III

305 304-6193
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**

MFA Farm Properties, 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 April 7, 2015 and assigned Florida document number _____.

This amendment is submitted to amend the following:

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

L15000060891

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

Enter new principal offices address, if applicable:

4070 Ashmore Place

(Principal office address MUST BE A STREET ADDRESS)

Pensacola, Florida 32503-3430

Enter new mailing address, if applicable:

4070 Ashmore Place

(Mailing address MAY BE A POST OFFICE BOX)

Pensacola, Florida 32503-3430

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:

Cynthia A. Bodkin

New Registered Office Address:

4070 Ashmore Place

Enter Florida street address

Pensacola

City

Florida 32503-3430

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.

Cynthia A. Bodkin
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>	<u>Type of Action</u>
MGR	Millard F. Adams, Jr.	4850 Alex Reed Trail	<input type="checkbox"/> Add
		Pace, Florida 32571-1603	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Cynthia A. Bodkin	4070 Ashmore Place	<input checked="" type="checkbox"/> Add
		Pensacola, Florida 32503-3430	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

15 NOV - 2 AM 11:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 NOV - 2 AM 11:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

100

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated October 28, 2015

Cynthia A. Bodkin
Signature of a member or authorized representative of a member

Cynthia A. Bodkin

Typed or printed name of signee