1160000016995

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(Address)
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S TALLENT FEB 18 2019



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February 7, 2019

MICHAEL CARPINO 14014 LEM TURNER RD JACKSONVILLE, FL 32218

SUBJECT: FREE RANGE EGGSTRAVAGANT EGGS LLC

Ref. Number: L16000016995

We have received your document and check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

ON PAGE 3 OF 3, PLEASE DATE AND SIGN THE DOCUMENT.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent Regulatory Specialist II

Letter Number: 819A00002714

2/15/19

COVER LETTER

	Registration Sec Division of Cor				
our ir or		e Eggstravagant Eggs LLC			
SUBJEC	Name of Limited Liability Company				
The enclos	sed Articles of a	Amendment and fee(s) are sub	mitted for filing.		
Please reti	urn all correspon	ndence concerning this matter	to the following:		
		Michael Carpino			
			Name of Person	 	
		14014 Lem Turner Rd	Firm/Company		
		Jacksonville, FL 32218	Address		
		Carpinofarm@icloud.com	City/State and Zip Code	<u> </u>	
			to be used for future annual report notific	cation)	
For furthe	r information co	oncerning this matter, please ca			
Michael (Carpino		508 713-2002 at ()		
	Name of	f Person	Area Code Daytime	Telephone Number	
Enclosed i	is a check for th	ue following amount:			
□ \$25.0i	0 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:

TO:

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

Free Range Eggstravagant Eggs LLC

(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our record Liability Company)	<u>s.</u>)	
The Articles of Organization for this Limited Liability Company Florida document number L16000016995	were filed on	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
Patriot Home Builders LLC		,	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC	" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	14014 Lem Turner Rd		
(Principal office address MUST BE A STREET ADDRESS)	Jacksonville, FL 32218		
		÷ 2; 16	
Enter new mailing address, if applicable:	14014 Lem Turner Rd	FIB 11	
(Mailing address MAY BE A POST OFFICE BOX)	Jacksonville, Fl 32218	- T	
		- 74 🔾	
		· · · · · · · · ·	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here. Name of New Registered Agent:		s, enter the name of the new	
New Registered Office Address:	Enter Florida street addres.	s	
	Fle	orida	
	City	Zip Code	
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agroup provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as peing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, an provided for in Chapter 605,	nd I am familiar with and F.S. Or, if this document is	

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:

 $MGR = \cdot Manager$ AMBR = Authorized Member **Address Type of Action Title** Name ☐ Add ☐ Remove _□ Change _ 🗆 Add __ 🗆 Remove ☐ Remove _□ Change □ Add _□ Remove □ Remove ☐ Change _□ Add ☐ Remove

☐ Change

D. 'If an	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
-	
	·
(If an o <u>Note</u>	ctive date, if other than the date of filing: ———————————————————————————————————
If the ro (b) Th	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed.
Date	Multiple Cay Signature of a member or authorized representative of a member
	Michael Carpino

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00