

L16000024090

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S Warren

JAN 17 2017

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Farmer's Way, 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:

Tina K. Smith
Name of Person
Farmer's way, LLC
Firm/Company
7892 West Longfellow Street
Address
Homosassa, FL 34448
City/State and Zip Code
theflippinduo@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tina K. Smith at (352) 340-7466 cell
Name of Person Area Code Daytime Telephone Number
(352) 765-4163 home

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input checked="" type="checkbox"/> \$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**

Farmer's Way, 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 February 04, 2016 and assigned Florida document number L16000024090.

This amendment is submitted to amend the following:

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

The FLIPPIN DUO, LLC.

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:

(Principal office address MUST BE A STREET ADDRESS)

7892 West Longfellow Street
Homosassa, FL 34448

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

7892 West Longfellow Street
Homosassa, FL 34448

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:

Tina K. Smith

New Registered Office Address:

7892 West Longfellow Street

Enter Florida street address

Homosassa

Florida

34448

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.

Tina K. Smith

If Changing Registered Agent, Signature of New Registered Agent

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STATE
TALLAHASSEE, FL
IDA

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 AMBR	Carroll L. Smith	7892 West Longellow Street Homosassa, FL 34448	<input checked="" type="checkbox"/> Add
AP	Authorized person ✓		<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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TALLAHASSEE, FLORIDA

This image shows a single page of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are approximately 20 lines visible. On the far left edge, there are two small dark marks, possibly punch holes or staples. In the bottom right corner, there is a very faint number "7". The rest of the page is completely blank except for the lines.

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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

Dated January 10, 2017.

Vina K. Smith

Signature of a member or authorized representative of a member

Tina K. Smith

Typed or printed name of signee

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Filing Fee: \$25.00

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