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DATE: 2/23/2021

NAME: WEST FLORIDA HAYHUTS, L.L.C.

TYPE OF FILING: AMENDMENT

COST: 25.00

RETURN: PLAIN COPY PLEASE

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AUTHORIZATION: ABBIE/PAUL HODGE Chibice Hodge

COVER LETTER

Div	ision of Cor	porations		
SUBJECT:		a Hayhuts, L.L.C.		
		Name of Lin	mited Liability Company	
The enclosed	d Articles of .	Amendment and fec(s) are sul	bmitted for filing.	
Please return	all correspo	ndence concerning this matter	r to the following:	
		Kerry Anne Schultz		
			Name of Person	
		Schultz Law Group, P.L.I.	C.	
			Firm/Company	 -
		2779 Gulf Brecze Parkwa	у	
			Address	
		Gulf Breeze, Floirda 3256	3	
			City/State and Zip Code	
		kas@schultzlawgrp.com		
		E-mail address: (to be used for future annual report notification)
For further in	formation co	ncerning this matter, please c	all:	
Kerry Anne S	Schultz		(850 754-1600 at ()	
	Name of	Person	Area Code Daytime Telep	hone Number
Enclosed is a	check for the	following amount:		
■ \$ 25.00 Fi	ling Fce	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 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

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

West Florida Hayhuts, L.L.C.		
(<u>Name of the Limited Liabili</u> (A Florida	Ity Company as it now appears on our records. a Limited Liability Company))
The Articles of Organization for this Limited Liability C	Company were filed on 03/04/2016	and assigned
Florida document number L16000049998	<u>_</u> ,	
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the lim	ited liability company here:	
fart Farms South, L.L.C.		
he new name must be distinguishable and contain the words "Lim	ited 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 ADDR	RESSI	
inter new mailing address, if applicable:		
		<u> </u>
Mailing address MAY BE A POST OFFICE BOX)		
		<u>, </u>
		. 2
. If amending the registered agent and/or registered gent and/or the new registered office address here:	l office address on our records, <u>enter tl</u>	ie name of the new registe
ern and/or the new registered office address here:		77. 70
		m -
Name of New Registered Agent:		 -
New Registered Office Address:		
	Enter Florida street address	
	. Flor	ida
	City	Ziv 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 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>	Address	Type of Action
			
		<u></u>	□Remove
			□Change
			□Add
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			Change
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Note: If the da	, if other than the da e is listed, the date must be the inserted in this block ective date on the Depa	does not meet the a	pplicable statutory:	(option or more than 90 days after f filing requirements, this	nal) iling.) Pursuant to 605.0207 date will not be listed as
e record specific rd is filed.	es a delayed effective de	ate, but not an effect	íve time, at 12:01 a	m. on the earlier of: (b)	The 90th day after the
Dated F	215 22	2021			
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