L16000053943

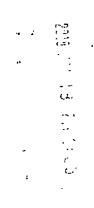
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12/05/17--01004--024 **25.00



J. HARRIS

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: The Jasper Wild Honey Company 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:
Burth. Fairchild Name of Person
Firm/Company
1655 Sweetwater West Circle
Apopka FL 327/2- City/State and Zip Code but fair childen amail, com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Burt L. Fairchild at (407) 415-5655 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \text{\$30.00 Filing Fee & Certificate of Status}\$\$ Certificate of Status \$\Bigcup \text{\$60.00 Filing Fee, Certified Copy (additional copy is enclosed)}\$\$\$ 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



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 4, 2018

BURT L FAIRCHILD 1655 SWEETWATER WEST CIRCLE APOPKA, FL 32712

SUBJECT: THE JASPER WILD HONEY COMPANY

Ref. Number: L16000053943

We have received your document for THE JASPER WILD HONEY COMPANY and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter. - see section

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct 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) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 718A00000257

RECEIVED
JAN 1 8 2018



-COPY-

FLORIDA DEPARTMENT OF STATE Division of Corporations

December 18, 2017

BURT L FAIRCHILD 1655 SWEETWATER WEST CIRCLE APOPKA, FL 32712

SUBJECT: THE JASPER WILD HONEY COMPANY

Ref. Number: L16000053943

We have received your document for THE JASPER WILD HONEY COMPANY and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct 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) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 617A00025502

RECEIVED.

JAN - 4 2018



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 5, 2017

BURT L FAIRCHILD 1655 SWEETWATER WEST CIRCLE APOPKA, FL 32712

SUBJECT: THE JASPER WILD HONEY COMPANY

Ref. Number: L16000053943

We have received your document for THE JASPER WILD HONEY COMPANY and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

The document number of the name conflict is L05000032081.

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned. Consider marked 12/10/17 forth Gardell

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 817A00024521

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

The Articles of Organization for this Limited Liability Company we Florida document number <u>L. 1600053943</u> . This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability	
The new name must be distinguishable and contain the words Limited Liability	Fairchild Timberland Enterprises LC
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	- C:
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: 01/16/18 Aperical	airchill and Burbara J. Varchild Revocable Trust

If Changing Registered Agent, Signature of New 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

New Registered Agent's Signature, if changing Registered Agent:

company has been notified in writing of this change.

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
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Page 3 of 3

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