

L16000129654

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

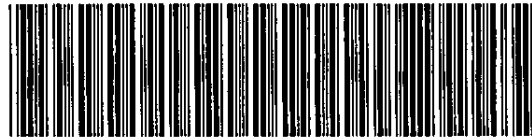
(Business Entity Name)

(Document Number)

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O. SIMMONS

8 2017

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FAX

Date: 02.07.2017 16:42

Remaining pages: 4

From: law@tumersharif.com
Company:
Location:
Phone number:
Fax number: 844 272-0950

To: Attention Octavia Simmons
Company: Florida Department of State
Location: Division of Corps
Phone number:
Fax number: 850 245-6030

Regarding: Letter Number: 217A00001648

Comments:

the amendment to Pegasus Food Futures LCC has been corrected to reflect the proper name: "Pegasus Food Futures LLC".
Thank you

RECEIVED
2017 FEB - 7 PM 4:56
SECRETARY OF
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Pegasus Agriculture Group 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:

Omar Sharif

Name of Person

Turner & Sharif

Firm/Company

170 E. 17th Street, Suite 110

Address

Costa Mesa, CA 92627

City/State and Zip Code

law@tumersharif.com

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

For further information concerning this matter, please call:

Omar Sharif

949
at ()

287-6901

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**

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

Page 1 of 3

Unknown

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>
_____	_____	_____	☐ Add
		_____	☐ Remove
		_____	☐ Change
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		_____	☐ Remove
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		_____	☐ Remove
		_____	☐ Change

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