116000218075

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	ne #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Na	me)
(Do	ocument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	





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WALLANASSEE OF STANE

D. BRUCE DEC 16 2016

COVER LETTER

TO: Registration Sec Division of Corp					
SUBJECT: Pack	Per Produce Name of Lim	in all inhibits Commons			
	Name of Lim	ned Clability Company			
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.			
Please return all correspon	dence concerning this matter	to the following:			
	ŀ	Kristo Becko			
				-	
,	Pach	er Produce Firm/Company	LLC		
				_	
	1940 Patlin	Circle North	l		
		Address		_	
	Kristok Becker	33770		_	
	Vinday B. h	City/State and Zip Code			
	E-mail address: (to be used for future annual	report notification)		
For further information co	ncerning this matter, please ca				
Kristo Beck	'lh	at (_727_)	488 - 1629 Daytime Telephone Number	2018 TALL	
Name of	Person	Area Code	Daytime Telephone Numbe	2016 DEC 15 SEDNE TARY NLLAHASSE	TIM
Enclosed is a check for the	following amount:			``ac'	1
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enc	Certific (losed)	iling Fee,	Ö

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

	er Produce		
(Name of the Limite	d Liability Company as it n A Florida Limited Liability (ow appears on our records.) Company)	
The Articles of Organization for this Limited Lia Florida document number	ability Company were fil	ed on 12 /01/2	and assigned
This amendment is submitted to amend the follow	wing:		
A. If amending name, enter the new name of	the limited liability con	npany here:	
Enter new principal offices address, if applica (Principal office address MUST BE A STREET			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE B	<u></u>		
B. If amending the registered agent and/o registered agent and/or the new registered off		dress on our records, <u>e</u>	nter the name of the new
Name of New Registered Agent:	Irma Di	ndi Circle North	SSEE, F
New Registered Office Address:	1940 Pattin		
	Larus	Enter Florida street address	- 1
	Largo City	, Florid	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.

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 = A	uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Irma Dindi	1940 Paflin Circle North Largo Fl 33770	X Add
		Lago F1 33770	□ Remove
			□ Change
AMBR	Kristo Bucka	1940 Patlin Circle North Largo Fl 33770	
		Largo F1 33770	▼ Remove
		,	Change
			Add
			Remove
			Change
		·	Add
			Bemove Typhange
		AHASS.	Tyhange
		で で で の 表	Add
		<u> </u>	Remove
			Change
			Add
			□ Remove
			□ Change

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ective	e date if other than the date of filing: (antional)
n effect	e date, if other than the date of filing:
	the date inserted in this block does not meet the applicable statutory filing requirements, this date will not listed to selfective date on the Department of State's records.
	ASS.
reco	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. an the earlier of the day after the record is filed.
+ a d	December 12th 2016
.eu	
	With da dalla
	Signature of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00