L17000004552

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Q. SILAS
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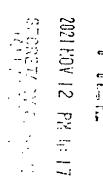
Office Use Only

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COVER LETTER

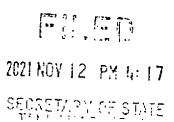
Registration Section

TO:

Division of Cor	porations			
	rvices, LLC			
SUBJECT:	Name of Lin	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	united for filing		
		<u>-</u>		
Please return all correspo	endence concerning this matter	to the following:		
	Candace Pollard			
		Name of Person		
	Tax Professional Services.	LLC		
		Firm/Company	·	
	1105 W Maple Ave			
	· · · · · · · · · · · · · · · · · · ·	Address		
	Geneva AL 36340			
	-	City/State and Zip Code		
	candace.pollard@taxprolle.	com to be used for future annual report no	(Complete)	
For further information c	oncerning this matter, please c	·	uncanony	
Candace Pollard	, and the state of			
		334 684-6398 at ()	me Telephone Number	
Name o	f Person	Area Code Daytii	me Telephone Number	
Enclosed is a check for the	ne following amount:			
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Addres Registration S		Street Address:	ection	
Division of C		Registration Section Division of Corporations		
P.O. Box 632	.7	The Centre of	Tallahassee	
Tallahassee, l	FL 32314	2415 N. Monro	oe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Circle P Services, 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 I	_iability Company	were filed on $\frac{01-6}{6}$)5-2017	and assigned
Florida document number L17000004552				
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited lial	nility company he	<u>re</u> :	
Circle P Services & Farms, LLC				
The new name must be distinguishable and contain the	words "Limited Liab	ility Company," the de	signation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	n/a		
(Principal office address MUST BE A STREE	<u>ET ADDRESS)</u>			
Enter new mailing address, if applicable:		n/a		
(Mailing address MAY BE A POST OFFICE	E BOX)		<u> </u>	-
			<u>-</u>	
B. If amending the registered agent and/or agent and/or the new registered office address Name of New Registered Agent:		address on our re	cords, <u>enter the na</u>	me of the new registered
New Registered Office Address:	n/a		<u> </u>	
		Enter Flori	da street address	
			, Florida _	Zip Code
N. B. J	D	•		Zip Code
New Registered Agent's Signature, if changing		-		
I hereby accept the appointment as register provisions of all statutes relative to the propaction as register the obligations of my position as registing filed to merely reflect a change in the company has been notified in writing of this	per and complete sistered agent as registered office	performance of provided for in C	my duties, and I am hapter 605, F.S. Or	familiar with and r, if this document is
	If Cha	nging Registered Age	nt. Signature of New R	egistered 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
AMBR	Ryan Pope	1320 Beaver Dam Road	Add
		Bonifay, FL 32425	■Remove
			□Change
AMBR	Brooke Pope	1320 Beaver Dam Road	□Add
		Bonifay, F1, 32425	■Remove
			□Change
			□Add
			□Remove
			☐ Change
	·		🗀 Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□ Add
			□Remove
			Change

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		<u></u>			
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<u>- </u>	_			 .	
					
					
an effective date is I ote: If the date ir		rific and cannot be person to some some some some some some some som	plicable statutory fi		nal) iling.) Pursuant to 605.0207 date will not be listed as
record specifies a is filed.	delayed effective date, l	but not an effectiv	ve time, at 12:01 a.n	n, on the earlier of: (b)	The 90th day after the
October 14		2021			
	1 7	12	·		
	20	ry	-	e	
	Signatu	re of a member or :	uthorized representat	ve of a member	
	<i>/</i> }		\cap		

Filing Fee: \$25.00