## L170000 48548

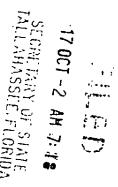
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## **COVER LETTER**

то:	Registration Sec Division of Corp	ction porations	•	
		S FARM LLC		
SUBJEC	CT:	Name of Limi	ited Liability Company	
The encl	losed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please ro	eturn all correspor	ndence concerning this matter	to the following:	
		DEVON ROBINSON		
			Name of Person	
		THE BLUES FARM LLC		
			Firm/Company	
		3250 NE 140 AVENUE		
			Address	<del></del>
		WILLISTON, FL 32696		
		<del></del>	City/State and Zip Code	
		terryr311@gmail.com	to be used for future annual report notifi	catiun)
For furth	her information ed	oncerning this matter, please ca		Cunton
DEVO	N ROBINSON		352 529-0594 at ()	
-	Name of	Person	Area Code Daytime	Telephone Number
Enclose	d is a check for th	e 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

THE BLUES FARM LLC		
(Name of the Limited Liability Com (A Florida Limited	pany as it now appears on our records.) d Liability Company)	
The Articles of Organization for this Limited Liability Compan	ny were filed on March 2, 2017	and assigned
Florida document number L17000048548		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	ibility company here:	
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Established Winner Market of applicable		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		<del>.</del>
B. If amending the registered agent and/or registered	office address on our records, ente	r the name of the ne
registered agent and/or the new registered office address he		17 SE
Name of New Registered Agent:		CRATI
New Registered Office Address:	Enter Florida street address	SSS V
	. Florida	TO B IT
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agen	ıt:	≒u 🛥

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>	<u>Address</u>	Type of Action
MGR	Michelle Hampton	3250 NE 140 Avenue	🖸 Add
		Williston, FL 32696	Remove
			□ Change
MGR	Devon Robinson	3250 NE 14 Avenue	
		Williston, FL 32696	☐ Remove
			Change
MGR	Terry Robinson	3250 NE 140 Avenue	
		Williston, FL 32696	
			Change
MGR	Sharon L. Robinson	3250 NE 140 Avenue	<b>■</b> Add
		Williston, FL 32696	☐ Remove
		<del> </del>	Change
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		<del></del>	☐ Remove
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ffective date, if other than the da	ite of filing	:			ے۔ (optional)		
an effective date is listed, the date must b <b>Sote:</b> If the date inserted in this bloc ocument's effective date on the Dep	does not me	eet the applica	o date of filing o ble statutory fi	r more than 90 day ling requiremen	s after filing.) Pu ts, this date wil	rsuant to 605 I not be liste	i.0207 ed as
e record specifies a delayed e The 90th day after the recor		ate, but not	an effectiv	e time, at 12	:01 a.m. on	the earlie	er of
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Filing Fee: \$25.00