

L17000076593

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(Address)

(City/State/Zip/Phone #)

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CLERK OF DISTRICT COURT
DISTRICT OF COLUMBIA

S. WARREN

JAN 16 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AOFD Network, 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:

Alan Temple

Name of Person

Agrarian Organics, LLC

Firm/Company

2770 Indian River Blvd Suite 501

Address

Vero Beach, FL 32960

City/State and Zip Code

alan@templefamilyco.com

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

For further information concerning this matter, please call:

Alan Temple

772 473-0036
at ()

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

Already paid
CK #1010

☐ \$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

Warren, Stacey M.

From: Alan Temple <alan@templefamilyco.com>
Sent: Tuesday, January 16, 2018 1:42 PM
To: Warren, Stacey M.
Subject: Re: Forms per your request.

Hi Stacey,

I am the Principal for Agrarian Organics, LLC. This email serves as my letter to release the name.

Thanks...Alan

On Jan 16, 2018, at 12:52 PM, Warren, Stacey M. <Stacey.Mason@dos.myflorida.com> wrote:

Hello, I was attempting to file this document and I see that we had an Agrarian Organics, LLC a florida entity that was voluntarily dissolved on 12/1/17. We hold the name for 120 days unless we receive a release letter from the principal stating they have no intention of reinstating the entity and are releasing the name. Is that something you can provide to me? Otherwise you will have to alter the name. Sorry I missed this last week...

Stacey M. Warren
Department of State
Division of Corporations
LLC Section
(850) 245-6097

From: Alan Temple [<mailto:alan@templefamilyco.com>]
Sent: Friday, January 12, 2018 2:48 PM
To: Warren, Stacey M.
Subject: Forms per your request.

Hi Stacey,

Please confirm receipt and let me know when the name has been officially changed.

Thanks...Alan

Alan Temple
Phone: 772-473-0036
<image002.png>

The Department of State is committed to excellence. Please take our Customer Satisfaction Survey .

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

AOFD Network, 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 Liability Company were filed on 04/05/2017 and assigned
Florida document number L17000076593.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Agrarian Organics, LLC

The new name must be distinguishable and contain the words "Limited Liability 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) _____

Enter new mailing address, if applicable: _____

(Mailing address MAY BE A POST OFFICE BOX) _____

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida street address

_____, Florida
City

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JUDICIAL CIRCUIT IN AND FOR
THE COUNTY OF DADE
FLORIDA

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 Re

d at

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>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
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		_____	<input type="checkbox"/> Change

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CLERK OF DISTRICT COURT
JAN 10 2018

17 DEC -6 PM 4:20
FBI - NEW YORK

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17 DEC -6 PM 4:25
FBI - MEMPHIS

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated 1/12/18

Signature of a member or an

Signature of a member or authorized representative of a member

ALAN EMPE

Typed or printed name of signee