L17000076643

Office Use Only



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05/05/17--01017--009 **25.00

FILED 2011MAY -5 PM 2: 36 SECRETARYEF STATE

K. SALY MAY - 9 2017

COVER LETTER

	egistration Secti vision of Corpo			
	TULLABEE I	FARMS LLC		
SUBJECT		Name of Limite	ed Liability Company	
The enclose	ed Articles of An	nendment and fee(s) are subm	itted for filing.	
		ence concerning this matter to	-	
		RICHARD BUMSTEAD		
			Name of Person	
		TULLABEE FARMS LLC		
			Firm/Company	
	ı	3051 RAGIS RD		, · · · · ·
			Address	
		EDGEWATER, FL 32132		
			City/State and Zip Code	
		E-mail address: (to	be used for future annual report notific	ation)
For further	information con-	cerning this matter, please cal	!:	
RICHARE	BUMSTEAD		386 314-9413	
	Name of P	erson	Area Code Daytime	Telephone Number
Enclosed is	a check for the	following amount:	# 4.2 ⁵	
\$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:

TO:

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

2017MAY = 5 PM 2:36 **TULLABEE FARMS LLC** (Name of the Limited Liability Company as it now appears on our recor (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 04/05/2017 Florida document number _______ L17000076643 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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

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 = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	ANNIE LEE BUMSTEAD	3051 RAGIS RD	■ Add
		EDGEWATER, FL 32132	Remove
			☐ Change
			Add
			Remover
			SE PO Add.
			Remove
			Change
	•		□ Remove
			☐ Change
		 	Add
			Remove
			Change
			Add
			☐ Remove
			☐ Change

Effective date, if other than the date of filing: an effective date, if other than the date of filing: 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 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as locument's effective date on the Department of State's records. The 90th day after the record is filed. APRIL 28 2017 Signature of a member or authorized representative of a member					
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Filing Fee: \$25.00