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20 Jan In PH In 5

Y SULKER JAN 14 2020 enclosed Articles of Amendment and fee(s) are submitted for filing.

se return all correspondence concerning this matter to the following:

Alex Kantor

Name of Person

Loyd Farms LLC

Firm Company

C-O-Box 336

Address

Loyd FL 3337

City/State and Zip Code

Natalie D Lloyd Nusery. Com

Empiladic to be used for future annual constraintification)

further information concerning this matter, please call:

atalie Kantor at (350), 997-0085

Name of Person Area Code Daytime Telephone Number

osed is a check for the following amount:

\$25,00 Filling 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
radditional copy is enclosed)

Mailing Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

TO ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Lloyd Farms LLC

(A Florida Limited Li	ability Company)
: Articles of Organization for this Limited Liability Company viida document number <u>L 170001462</u> 02	were filed on Joly 7, 2017 and assigned
s amendment is submitted to amend the following:	
If amending name, enter the new name of the limited liabil	
new name must be distinguishable and contain the words "Limited Liability	ty Company," the designation "L.L.C" or the abbreviation "L.L.C."
ter new principal offices address, if applicable:	262 Willie Rd
incipal office address MUST BE A STREET ADDRESS)	Monticello FL 32344
er new mailing address, if applicable: <u>uling address MAY BE A POST OFFICE BOX)</u>	PO BOX 236 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
If amending the registered agent and/or registered office ac nt and/or the new registered office address here:	ddress on our records, enter the name i in re refec
Name of New Registered Agent:	oz Willie Rd
New Registered Office Address: 2 U	02 Willie Rd Enter Florida street address
Man	ative No my 27344

Registered Agent's Signature, if changing Registered Agent:

why accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the visions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and pt the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is gilled to merely reflect a change in the registered office address. I hereby confirm that the limited liability pany has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

	Manager Authorized Member		
<u> e</u>	<u>Name</u>	Address	Type of Action
FR.	Alex Kantor.	P.O. Box 236. Lloyd, FL 32337	□Add
			□Remove ☑Change
6R N	Natalie Kantor	P.O. Box 236 Lloyd, FL 32337	l X \dd
			□Remove
		·	□Change
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emoved from our records:

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fective date is liste If the date inser	ner than the date of ed, the date must be specif rted in this block does date on the Departmen	fic and cannot be prior to not meet the applicat	o date of filing or more th	han 90 days after filing.	
d specifies a del led.	layed effective date, bu	at not an effective tin	ne, at 12:01 a.m. on th	ne earlier of: (b) The	e 90th day after the
T.	ary 14	2020	<u>.</u> . 1		
Janua	Signature	Ma member of author	rized representative of a	member	