L17000224579

(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
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2022 JUN 17 PM 12: 02

COVER LETTER

Tallahassee, FL 32314

TO:	Registration Se Division of Cor			
CHELL		others Cattle and Land, LLC		
SUBJE	CI:	Name of Lim	ited Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please r	eturn all correspo	ondence concerning this matter	to the following:	
		Karen Papke		
			Name of Person	
		EHV Consulting, Inc		
			Firm/Company	
		4422 NE 83rd Road		
			Address	
		Wildwood, FL 34785		
			City/State and Zip Code	
		karen.papke@ehvcon.com	to be used for future annual report no	orification)
For furt	her information o	concerning this matter, please c		Aincanon
David V	Waller		352 949-1593	
	Name o	of Person	at () Area Code Dayti	ime Telephone Number
Enclose	ed is a check for t	he following amount:		
□ \$25	5.00 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 Addre Registration	Section	Street Address: Registration S	Section
	Division of O P.O. Box 633		Division of C The Centre of	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

Waller Brothers Cattle and Land, LLC

2022 JUN 17 PM 12: 02

Cattle and Land, LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

TALLAHASSEE The Articles of Organization for this Limited Liability Company were filed on 10/30/2017 and assigned Florida document number L17000224579 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 ___, Florida ___ City

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 mv 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 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

Title	Name	Address	Type of Action
AMBR	Karen Papke	180 North Highview Avenue, Hernando FL 34442	= Add
			□ Remove
			□ Change
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Note: If the date inserted in this	the date of filing: 5/26/2022		
document's effective date on me			
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