# L18000009782

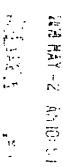
(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



100326368041

05/02/19--01024--013 \*\*25.00



WINT TO SOLL

#### **COVER LETTER**

Southern	CHRISTmas Tree Farm, LLC		
SUBJECT:	Name of Limi	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	James W Salis		
		Name of Person	
		Firm/Company	
	274000 Murrhee Road		
		Address	
	Hilliard, Florida 32046		
		City/State and Zip Code	<del></del>
	iwsalis21@gmail.com E-mail address: (	to be used for future annual report notifi	cation)
For further information of	concerning this matter, please ca	ali:	
James W Salis		904 334-6566 at ()	
Name o	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	he 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** 

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

Southern Christmas Tree Farm, 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  $\frac{01/10/2018}{}$ Florida document number <u>L18000009782</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: A Southern Christmas Tree Farm, 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

#### 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.

City

If Changing Registered Agent, Signature of New Registered Agent

\_, Florida \_\_

## 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>	Address	Type of Action
			☐ Remove
			Change
			Add
			Remove
		<del></del>	Change
			□ Remove
			☐ Change
			Add
			Remove
			Change
			Add
			Remove
			Change
			□ Remove
			Change

D. If amending any other informa	uon, enter cnange(s) here	e: (Allach addiliona	u sneets, ij necessary.)	
		<del></del>		
<del>/</del>				
			<del></del>	<del></del>
		<u></u> .		
				<del></del>
			<u> </u>	
<del></del>				
· <del>-</del>				
		<del></del>		
				<del></del> -
				<del></del>
	_	. <del></del> .		
Effective date, if other than the (If an effective date is listed, the date must Note: If the date inserted in this blo document's effective date on the De	t be specific and cannot be prior ock does not meet the applica	to date of filing or more able statutory filing re	(optional) than 90 days after filing.) Precquirements, this date wi	ursuant to 605.0207 (3) If not be listed as the
the record specifies a delayed  ) The 90th day after the reco	effective date, but not ord is filed.	t an effective tim	ie, at 12:01 a.m. on	the earlier of:
Dated April 26,	, 2019			
-hour				
Z Mru~	Signature of a member or autho	orized representative of	a member	
√     James W Salis				
	Typed or printe	d name of signee		<del></del>

Page 3 of 3

Filing Fee: \$25.00