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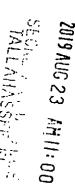
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### **COVER LETTER**

3 Boys Fa	rm, LLC		
SUBJECT:	Name of Lim	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:	
	Michael Bondurant		
		Name of Person	· · · ·
Name of Person  3 Boys Farm, LLC  Firm/Company  1112 North Flagler Drive  Address  Fort Lauderdale, FL 33304  City/State and Zip Code  Mbondurant@3boysfarm.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Michael Bondurant  954 527-4111  at (			
		Firm/Company	
	1112 North Flagler Drive		
		Address	
	Fort Lauderdale, FL 3330	4	
	<del></del>	City/State and Zip Code	
	Mbondurant@3boysfarm.c	om	
	E-mail address: (	to be used for future annual report notifi	cation)
For further information of	concerning this matter, please ca	nll:	
Michael Bondurant		954 527-4111	
		at ()	
Name o	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	he following amount:		
\$25.00 Filing Fee		Certified Copy	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

**Registration Section Division of Corporations** 

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

# TO ARTICLES OF ORGANIZATION OF

3 Boys 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 \_\_\_\_\_\_ and assigned L18000037389 Florida document number 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 registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address \_. Florida <u>\_\_\_</u> 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 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

#### or removed from our records:

## MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Michael Smuts	1112 North Flagler Drive	
		Fort Lauderdale, FL 33304	<b>_</b> Add
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Effective date, if other than the date of filing:	
document's effective date on the Department of State's records.  the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earl	ier o
) The 90th day after the record is filed.	
Dated Signature of a member or authorized representative of a member	
Michael Bondurant	
MICHAEL DOMOGRAM	

Page 3 of 3

Filing Fee: \$25.00