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(Re	equestor's Name)	
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

N COOPER APR 06 2018

COVER LETTER

TO:

Registration Section

Divi	sion of Corporations		
SUBJECT:	Deep Creek Nursery LLC		
SOBJECT.	Nan	ne of Limited Lia	ability Company
Dear Sir or N	Madam:		
The enclosed	d Registered Agent/Registered Off	ice Change and	fee(s) are submitted for filing.
Please return	all correspondence concerning th	is matter to the f	following:
Elbert Rer	nfroe		
	Name of Person		_
Deep Cree	ek Nursery LLC		
<u></u>	Firm/Company	**************************************	
5220 Choo	ctaw Street		
	Address	101 F 1	_
St. August	ine, Florida 32092		
	City/State and Zip Code		_
deepcreek	nursery@gmail.com		
E-mail	address: (to be used for future ann	ual report notifi	cation)
For further in	nformation concerning this matter,	please call:	
Elbert Ren	froe	904 at (540-5864
	Name of Person	ur (Area Code & Daytime Telephone Number
Regi Divis Clift 2661	EET/COURIER ADDRESS: stration Section sion of Corporations on Building Executive Center Circle shassee, Florida 32301	Reg Div P.O	istration Section ision of Corporations . Box 6327 ahassee, Florida 32314
Encl	osed is a check for the following	amount:	
□ \$2	25 Filing Fee	2 \$55	5 Filing Fee & Certified Copy
INHS18 (2/14)		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Deep Creek Nursery LLC		
(Name of the Lim	ited Liability Company as it now appears on o (A Florida Limited Liability Company)	ur records.)
The Articles of Organization for this Limited		4 2018 and assigned
Florida document number L18000067663	**************************************	•
This amendment is submitted to amend the following	lowing:	
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 designa	ion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	
(Principal office address MUST BE A STRE	ET ADDRESS)	SEC NEC
		APR
		-5
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	E BOX)	STAT FLORI 2: 2
		2 RATE
B. If amending the registered agent and registered agent and/or the new registered of		records, enter the name of the ne
Name of New Registered Agent:	Elbert L Renfroc	
New Registered Office Address:		
	Enter Florida str	eet address
		. Florida
	Ciţ	Zip Code

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>	Address	Type of Action
MGR	Elbert L Renfroe	5220 Choctaw Street	□ Add
		St Augustine, FL 32092	□ Remove
			■ Change
AMBR	Melissa S Renfroe	5220 Choctaw Street	□ Add
		St. Augustine, FL 32092	□ Remove
		WAS STORY OF THE 	⊞ Change
			Add
			Remove
			□ Change
			□ Add
			□ Remove
			☐ Change
			D Add
			Remove
			□ Change
		4-70-0-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	□ Add
			Remove
			□ Change

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		March 14, 2018			
fective date, if other than t m effective date is listed, the date t	he date of filing:		f filing or more than 90	(optional)	ant to 605
ote: If the date inserted in this cument's effective date on the	block does not meet	the applicable stat	utory filing requiren	nents, this date will no	ot be liste
record specifies a delay The 90th day after the r	ed effective date ecord is filed.	e, but not an ef	fective time, at	12:01 a.m. on th	e earlie
March 26	2	2018			
ited Million 20	110	······································			
ケルルレ	41/2/				

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00