Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN HONEY LAKE PLANTATION, LLC

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EXAMINER

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Help

COVER LETTER

(((H19000038273 3)))

TO: Registre Division	tinz Section of Corporation	on rations				
	NEY LAK	E PLANTATION, LLC				
SUBJECT:		Name of Limi	ted Liability Company			
The enclosed Art	ticles of At	nendment and fee(s) are subr	nitted for filing.			
Please return all o	correspond	ence concerning this matter t	to the following:			
		JUSTIN B. GREGG				
			Name of Person			
		HONEY LAND PLANTA	MON, LLC			
			Firm/Company			
		9483 CR 49				
			Address			
		LIVE OAK, FLORIDA 32	060	ن فرخ ا	2019	
			City/State and Zip Code	Alas	URE A	ز · سم
		E-mail address: (to be used for future annual report notific	iation) m	型 <u>-</u>	
For further infor	mation con	cerning this matter, please ca	all:	, FLC	AH 9: OF STA	C
JUSTIN B. GRE	EGG		at ()		<u> </u>	
	Name of P	erson	at ()	Telephone Number		
Enclosed is a che	eck for the	following amount:				
\$25.00 Filin	g Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing F Certificate of Certified Copy (additional copy)	Status &	

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

(((H19000038273 3)))

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(((H19000038273 3)))

HONEY LAKE PLANTATION, L	LC			_
(Name of the Limit	ted Liability Compan (A Florida Limited L	is as it now appears on our recor- isbility Company)	ds 2)	
The Articles of Organization for this Limited L Florida document number L19000016656	iability Company	were filed on JANUARY 17, 2	2019 and	assigned
This amendment is submitted to amend the following	lowing:			
A. If amending name, enter the new name of	of the limited liabi	lity company here:		
The new name must be distinguishable and contain the	words "Limited Liabili	ry Company," the designation "LL	C" or the abbreviation	"L.L.C."
Enter new principal offices address, if appli	cable:		-	
(Principal office address MUST BE A STREE	ET ADDRESS)			~~~
			<u>ا من څخ</u> با-	2019
Enter new mailing address, if applicable:			AHA AHA Se	EB
(Mailing address MAY BE A POST OFFICE	BOX)			P
			—————————————————————————————————————	X ,
B. If amending the registered agent and registered agent and/or the new registered of	l/or registered of office address here	Tice address on our recor	ds, enter the han	me of the new
Name of New Registered Agent:	JUSTIN B. GR	egg		
New Registered Office Address:	9483 CR 49			
THE WINDS AND THE PARTY OF THE		Enter Florida street addr	न्धर	
	LIVE OAK	, J	Florida 32060	
		City	Zip C	ode

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.

f Chapping Registered Agent, Signature of New Registered Agent

Page 1 of 3

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 = M AMBR = A	anager uthorized Member	(((HI900	90038273 3)))
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	JUSTIN B. GREGG	9483CR 49	
		LIVE OAK, FLORIDA 32060	Remove
			☐ Change
			□ Add
			□ Remove
			☐ Change
			20 FEB
			Remove
			C. FI. ORIGINA C.
			□ Remove
			Change
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			Add
			□ Remove
			☐ Change

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