

3/8/2019

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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(((H19000079876 3)))



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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : BALWANT CHEEMA PA
Account Number : 120140000096
Phone : (305)698-1321
Fax Number : (305)675-8496

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: mercy@balcpa.com

FILED
19 MAR 16 AM 2:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
FARM STORM HOLDINGS LLC

Certificate of Status	0
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2019-03-15 20:22:10

Electronic Filing Menu

Corporate Filing Menu

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COVER LETTER**TO: Registration Section
Division of Corporations****SUBJECT: FARM STORM HOLDINGS LLC**

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MERCY PEREZ

Name of Person

BALWANT CHEEMA CPA

Firm/Company

4160 WEST 16TH AVE SUITE 405

Address

HIALEAH, FL 33012

City/State and Zip Code

mercy@balecpa.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MERCY PEREZ

305

829-2252 EXT 107

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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
P.O. Box 6327
Tallahassee, FL 32314**STREET/COURIER ADDRESS:**Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

(((H19000079876 3)))

2019-03-15 20:22:10 (GMT)

(((H19000079876 3)))

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

From: Merc

FILED
19 MAR 16 AM 2:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FARM STORM HOLDINGS 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 02/27/2019 and assigned
Florida document number L19000051268.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

FARM BROTHERS HOLDINGS 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:

501 HIALEAH DRIVE

(Principal office address MUST BE A STREET ADDRESS)

HIALEAH, FL 33010

Enter new mailing address, if applicable:

501 HIALEAH DRIVE

(Mailing address MAY BE A POST OFFICE BOX)

HIALEAH, FL 33010

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

City, **Florida**

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

(((H19000079876 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 = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	GEOVANNY TEJEDA	2794 W 68TH ST #108	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
		HIALEAH, FL 33016	<input type="checkbox"/> Change
MGR	JORGE CRUZ GUTIERREZ	501 HIALEAH DRIVE	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
		HIALEAH, FL 33010	<input type="checkbox"/> Change
MGR	STEVEN M AVILA	501 HIALEAH DRIVE	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		HIALEAH, FL 33010	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

19 MAR 16 AM 2:15
 STONE COUNTY
 TALLAHASSEE, FLORIDA

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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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19 MAR 16 AM 2:16
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U.S. DEPT. OF STATE
TALLAHASSEE, FLORIDA

F. Effective date, if other than the date of filing: _____ (optional)

Effective date, if other than the date of filing: _____ (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated March 15 2019

Signature of a member or authorized representative of a member

Steven Avila

Typed or printed name of signer