

L19000 117 718

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

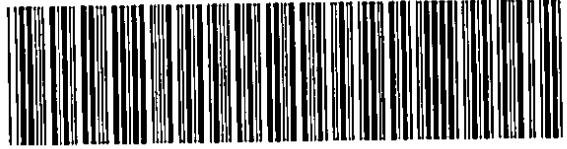
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FL 32310

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JUN 07 2019

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Breakaway Farms 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:

Donna M. Coulter

\_\_\_\_\_  
Name of Person

Breakaway Farms

\_\_\_\_\_  
Firm/Company

134 East Ranch Trail

\_\_\_\_\_  
Address

Palatka, FL 32177

\_\_\_\_\_  
City/State and Zip Code

donna.breakawayfarms@gmail.com

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

For further information concerning this matter, please call:

Donna M. Coulter

at ( 417 ) 300-8162  
\_\_\_\_\_  
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

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

Breakaway Farms 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 April 30, 2019 and assigned  
Florida document number L19000117718.

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 new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

*Enter Florida street address*

Florida

*City*

*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>	<u>Address</u>	<u>Type of Action</u>
MGR	Donna M. Coulter	134 East Ranch Trail	<input checked="" type="checkbox"/> Add
		Palatka, FL 32177	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Alyssa Ross	243 Argonaut Road	<input type="checkbox"/> Add
		Saint Augustine, FL 32086	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	Sydney T Coulter	134 East Ranch Trail	<input type="checkbox"/> Add
		Palatka, FL 32177	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
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2019 MAY 22 PM 2:30  
SECURITY  
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MAY 22 2019  
MAY 22 2019

FILED

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2019 MAY 22 PM 5:30  
SECRETARY OF DEFENSE  
MAIL ROOM  
(.) Pursuant to 60  
it will not be first

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Dated May 19, 2019

Donna M. Conley

**Donna M. Coulter**

**Filing Fee: \$25.00**