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DATE:

4/27/20

NAME:

URBAN DUCK FARM LLC

TYPE OF FILING: AMENDMENT

COST:

25.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

abbierHody

COVER LETTER

Registration Section

Tallahassee, FL 32314

TO:

Division of	Corporations				
	Duck Farm LLC				
SUBJECT:	PBJECT: Name of Limited Liability Company				
The enclosed Article	s of Amendment and fee(s) are sub	mitted for filing.			
Please return all corr	espondence concerning this matter	to the following:			
	Gabriela Arias	Gabriela Arias			
	Name of Person				
	ZenBusiness PBC				
	Firm/Company				
	702 San Antonio St 4th Fl	oor			
		Address			
	Austin, TX 78701				
		City/State and Zip Code			
	fulfillment@zenbusiness.co	om to be used for future annual report noti	Gantion		
For further informati	on concerning this matter, please c	-	incanony		
Gabriela Arias		512 237-7349 at ()			
Name of Person		Area Code Daytim	ne Telephone Number		
Enclosed is a check f	or the following amount:				
■ \$25.00 Filing Fe	e S30.00 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)		
<u>Mailing Ad</u> Registrati		Street Address: Registration Se	ction		
Registration Section Division of Corporations		Division of Cor	Division of Corporations		
P.O. Box 6327		The Centre of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Urban Duck Farm LLC		
(<u>Name of the Limited Liabi</u> (A Florid	lity Company as it now appears on our records.) da Limited Liability Company)	
The Articles of Organization for this Limited Liability	Company were filed on 10-11-2019	and assigned
Florida document number L19000256138	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lir	nited liability company here:	
Royal Chicken Farm LLC		
The new name must be distinguishable and contain the words "Li	mited Liability Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	(RESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		Z ₁₀ (8)
B. If amending the registered agent and/or register	ed office address on our records, enter the	name of the new registered
agent and/or the new registered office address here:		PR II
		N Time
Name of New Registered Agent:		
Name of New Registered Agent.		
New Registered Office Address:		
	Enter Florida street address	E S
	, Florid	a
	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 mailage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
			🗆 Add
			□Remove
			Change
			□Add
			□Remove
	···		□Add
			□Remove
			☐Change
			□Add
			Remove
			□Change
			□Remove
			Change
			□Add
			□Remove
			□Change

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). If amending any other inform	nation, enter change(s) here: (Attach additional sheets, i	if necessary.)
		
.		
Effective date, if other than 11 (If an effective date is listed, the date in Note: If the date inserted in this document's effective date on the	ne date of filing: just be specific and cannot be prior to date of filing or more than 90 day block does not meet the applicable statutory filing requiremen Department of State's records.	(optional) ys after filing.) Pursuant to 605.0207 (3)(ts, this date will not be listed as the
the record specifies a delay The 90th day after the re	ed effective date, but not an effective time, at 12 ecord is filed.	:01 a.m. on the earlier of:
Dated April 21st	. 2020	
	Signature of a member or authorized representative of a member	
Jeffrey Shepherd		
	Typed or printed name of signee	

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Filing Fee: \$25.00