# L19000281121

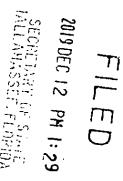
(Re	equestor's Name)	
(Ad	ddress)	
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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LLC Amend

## **COVER LETTER**

SUBJECT: (OPC	CO COOPES	ativa Agroindus- led Liability Company	trial (onsolata
The enclosed Articles of A	mendment and fee(s) are subn	nitted for filing.	
Please return all correspon	dence concerning this matter t	o the following:	
	John R	Name of Person	
	Coba (a) (oobs	rativa Agro ind USA	Gal (onsolata
	807 Ny 46+h	Ave	
	Pluntation, unifiedexiv	FL 33317 City/State and Zip Code  O D COM COST. O  o be used for future annual report notifi	C+ (cation)
For further information co	ncerning this matter, please ca	11:	
John Res	e cl Person	at ( <u>734)</u> <u>286 –</u> Area Code Daytime	-1044 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:

TO:

Registration Section Division of Corporations

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability o (A F)orida l	Company as it now appears on our rec Limited Liability Company)	ords.)
The Articles of Organization for this Limited Liability Co	ompany were filed on	and assigned
Florida document number	<u>-</u> ·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
The new name must be distinguishable and contain the words "Limit	ed Liability Company," the designation "I	.LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE	ESS)	
		<del>- 5</del> 5 <b>2</b>
D		SECURE TO A
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	<del> </del>	
D. If any all and a start of the start of th	cc 11	도 등원. <del>.</del> 이
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, ent	ter the name of the new registers
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street ode	lress
		Florida
	Ciry	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 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> Name **Address** Type of Action John REED SOFNW 46-In Ave DANGER Plantation FL, 33317 □ Remove 2246 OAKMAN Blud BAdd Detroit Mi 48238 MGR Donald Grittin Remove CEO SOHNREED 807NW 46th Ave Dlantartion FL, 33317 Coo Donald Griftin 2246 OAKMAN Blub DAdd \_\_\_\_\_\_ Change □Add \_ □Remove \_ □Change □Add □Remove

\_\_\_\_\_\_ Change

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Effect	ive date, if other than the date of filing:
lf an ef <u>Note:</u>	fective 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 ( If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as them; seffective date on the Department of State's records.
e reco rd is fi	rd 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 led.
Dated	DECEMBER 10th 2019.
	DECEMBER 10 ZO19.  Signature of a member or authorized representative of a member  Typed or printed name of signee
	Typed or printed name of signee

Filing Fee: \$25.00