## L20 000106854

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Division of Corporations	- E. F. 1991
SUBJECT:BANTU FARM 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:	
MONDE BONGO	
Name of Person	
BANTU FARM LLC	
Firm/Company	
18850 FOREST MANOR DR	
Address	
TALLAHASSEE FL 32310	
TALLAHASSEE FL 32310  City/State and Zip Code	******
Monde n. bongo @ gmail. co E-mail address: (to be used for future annual report notification	<u>M</u>
For further information concerning this matter, please call:	
MONDE BONGO at (856) 242 46  Name of Person Area Code Daytime Tele	525
Name of Person Area Code Daytime Tele	phone Number
Enclosed is a check for the following amount:	
[12] \$25.00 Filing Fee ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & Certificate of Status	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address: Street Address:	
Registration Section Registration Section	
Division of Corporations Division of Corpora	tions

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

TO:

Registration Section

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

## TO ARTICLES OF ORGANIZATION OF

2020 Ann 30	PH	1

BANTU FARM	LLC 30 PH 1
( <u>Name of the Limited Liability C</u> (A Florida Li	Company as it now appears on our records.) mited Liability Company)
The Articles of Organization for this Limited Liability Con Florida document number <u>L2000610685</u>	npany were filed on $04/20/2026$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	d liability company here:
The new name must be distinguishable and contain the words "Limited	I 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 ADDRES	(22
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered o agent and/or the new registered office address here:	ffice address on our records, enter the name of the new reg
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address

## 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 we provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with an accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document 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.

City

MGR = Ma $AMBR = Au$	nnager athorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Acti
AMBR	MONDE BONGO	18850 FOREST MANGR DR	_ ⊡⁄Add
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	Signature of	de Lynno a member orandhorized re	presentative of a memb	er	
		BONGO Typed or printed name			