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COVER LETTER

то:	Registration Section Division of Corporati	ons		2 4 1 1
SUBJ	ECT:	Name of Lim		KMS_L,L,C
The er	Division of Corporations BARMART FARMS L.L. Name of Limited Liability Company And Articles of Amendment and fee(s) are submitted for filing. Teturn all correspondence concerning this matter to the following: BARMART FARMS L.L. Firm/Company BARMART FARMS L.L. Firm/Company BARMART FARMS L.L. Firm/Company BARMART FARMS L.L. Firm/Company City/State and Zip Code First BARMART SOME And I com Femal address: (to be used for future number sport notification) There information concerning this matter, please call: FRIK BARMART at 213 Name of Person Area Code Daytime Telephone Number			
Please	return all correspondence	Division of Corporations T: BARNAR + FARMS L, L, C Name of Limited Liability Company Dosed Articles of Amendment and feefs1 are submitted for filing. turn all correspondence concerning this matter to the following: ERIK BARNAR + Name of Person BARNAR + Rd Address Man RE Report Report Ental address: To be used for haure annual grey notification) er information concerning this matter, please call: ERIK BARNAR + RD Area Code Doytime Telephone Number is a check for the following amount: Of Filing Fee S30.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) Mailing Address: Street Address:		
	Division of Corporations JAMMA FARMS L. L. Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Itense return all correspondence concerning this matter to the following: LRIK BARMAR FARMS L. L. C. Firm/Company US BRANAR FARMS			
		Barn	hurt Farms	L.L.C
		68	Barnhar +	Rd.
	_	Montite	City/State and Zip Code	2344
		ERIK BORY E-mail address: (hand 850 a) of rito be used for future annual report not	incation)
For fu	rther information concern	ing this matter, please c	all:	
	ERK BOLK Name of Person	naxt_	at (<u>213</u>) <u>280</u> Area Code Daytin	ne Telephone Number
Enclo:	sed is a check for the follo	owing amount:		
⊠S:	25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
		ກ		ection

Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

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

RARNHA	IRT FARY	45 L.L.C.
(Name of the Limited Liability Cor (A Florida Limit	npany as it now appears on our reled Liability Company)	records.)
The Articles of Organization for this Limited Liability Compa Florida document number <u>22000 11/5 6</u> 6	any were filed on $\frac{4-6}{3}$	94-J0DO and assigned
The Articles of Organization for this Limited Liability Company were filed on 4-34-3000 and assigned Florida document number 12000 11/5 62 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 "LLC." 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 registered of the new registered of the new registered		
A. If amending name, enter the new name of the limited li	iability company here:	
The new name must be distinguishable and contain the words "Limited Lienter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		"L.L.C." or the abbreviation "L.L.C."
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2020 MAY 22 SEGRE TAR TALL AND SSEE
B. If amending the registered agent and/or registered office and/or the new registered office address here:	ce address on our records, <u>e</u>	D TATE DRAFE
Name of New Registered Agent:		
New Registered Office Address:	r e e	
	Enler v torida street c	
	City	

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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR	Erik Barnhart	530 virgina st. montice 16	<u>L</u> Add
		530 virgina st. mentice 16 FL 32344	□Remove
			□Change
			□Add
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	- <u></u>		□Add
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mene	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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r effect <u>te:</u> - If	edate, if other than the date of filing:
cord s s filed	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after th
ed _	5-22-2020 2020.
	1515
	Signature of a member or authorized representative of a member
	FRIK BORALATE Typed or printed name of signee

Filing Fee: \$25.00