LZ0000143649

(Re	questor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Creek Cattle Cor	mpany LLC nited Liability Company
The enclosed Articles of Amendment and fee(s) are suf-	bmitted for filing.
Please return all correspondence concerning this matter	r to the following:
	Name of Person
_ Creek Co	HIE (ompany LLC) Firm/Company
677 BC	ardin Rd Address
Palatka, CK. brav	FL 32177 City/State and Zip Code Lman @ amail Com (to be used for future annual report notification)
For further information concerning this matter, please	
Callie Brauman Name of Person	at (38 to) 33 to 2874 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
, \$25.00 Filing Fee \$\forall \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) ☐ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)
Mailing Address: 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

	ompany LLC	
(Name of the Limited Liability Co (A Florida Limi	mpany as it now appears on our records.) ted Liability Company)	
The Articles of Organization for this Limited Liability Comp Florida document number <u>L-20001436</u> 4	any were filed on May 26, 20	20 and assigned
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 L	iability 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	2	
Enter new mailing address, if applicable:		
••		
(Mailing address MAY BE A POST OFFICE BOX)		
		
B. If amending the registered agent and/or registered offi	ice address on our records, enter the na	ame of the new registered
agent and/or the new registered office address here:		.*
		,
Name of New Registered Agent:		• •
New Registered Office Address:		<u></u>
	Enter Florida street address	(O
	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>	Address	Type of Action
MGR	Clayton Braumon	677 Bardin Rd	[Add
	7	677 Bardin Rd Palatka, FL 32177	□Remove
			□Add
			□Remove
		-	
			🖸 Add
			□Remove
			□Change
-			□Add
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`an effe <u>Vote:</u>	we date, if other than the date of filing: MQU 26, 2020 (optional) terive 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 605.020 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a ent's effective date on the Department of State's records.
record Lis filo	I 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 ed.
ated_	March 22 . 2021.
	Suprature of a member or authorized representative of a member

Filing Fee: \$25.00