L200CCI	ef. (*	Cle	3
---------	--------	-----	---

(Requestor's Name)		
(Address)		
(1001055)		
(Address)		
(City/State/Zip/Phone #)		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

Office Use Only



10/15/28--01019--003 ++35.00

FILED 2020 DCT 15 PH 4:17 SECULITY OF 57 WALK

LH. 11/18/20

COVER	LETTER

TO: Registration Section Division of Corporations

Jupiter Farms Nursery & Gardens LLC

SUBJECT:

:;

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:

Howard Mofsen CPA

Name of Person

Pinchevsky & Mofsen

Firm/Company

5541 N University Dr. Ste 103

Address

Coral Springs, FL 33067

City/State and Zip Code

howard@pinchevskymofsen.com

E-mail address, (to be used for future annual report notification)

For further information concerning this matter, please call:

Howard Mofsen 954 753-3545 at (______) Name of Person Area Code Daytime 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: 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

Jupiter Farms Nursery & Gardens LLC (Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.)	·	
(A Florida Limited I	Tability Company)		
The Articles of Organization for this Limited Liability Company Florida document number 120000170063	were filed on <u>June 18, 2020</u>	and assigned	
his amendment is submitted to amend the following:			
 If amending name, <u>enter the new name of the limited liab</u> 	ility company here:		
	Production and the Control of the Co	the abbreviation "L.L.C."	
The new name must be distinguishable and contain the words "Limited Liabi	19141 SE Reach Island Lane	The address and the design of	
Enter new principal offices address, if applicable:	Jupiter, FL 33458		
(Principal office address MUST BE A STREET ADDRESS)	Зараст, 11, 55456		
	·	2020	
Enter new mailing address, if applicable: <u>(Mailing address MAY BE A POST OFFICE BON)</u>	19141 SE Reach Island Lane		
	Jupiter, FL 33458		
		Τ, σ	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter th</u>	le name of the new registere	
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street address		
	Florida		
	Cay	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, <u>enter the title, name, and address of each person being added</u> or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
Mgr	Domenica Flora	19141 SE Reach Island Lane	🖺 Add
		Jupiter, FL 33458	🛛 Remove
			Change
Mgr	Frank Flora	19141 SE Reach Island Lane	🗐 Add
		Jupiter, FL 33458	Remove
			[]Change
			[] Add
			[]Remove
			Change
			🗆 🛆 dd
			Remove
			Change
			[]Add
			Change
			DPYD PPPP
			Change

~

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: ______(optional) (It an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after tiling.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record 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 record is filed. October 15 2020 an Signature of a member or authorized representative of a member Domenica Flora Typed or printed name of signee