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COVER LETTER

TO:	Registration Se Division of Cor						
	Baker Cou	nty Poultry and Egg LLC	,				
SUBJECT: Name of Limited Liability Company							
The er	closed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please	return all correspo	ondence concerning this matter	to the following:				
		Nathaniel James Young					
			Name of Person				
		Baker County Poultry and	Egg LLC				
			Firm/Company				
		13535 County Road 127					
		Sanderson / FL 32087	Address				
		njyyusn@gmail.com	City/State and Zip Code				
		E-mail address: (to be used for future annual report notif	ication)			
For fu	rther information o	concerning this matter, please ca	all:				
Natha	niel James Young		850 417-2418				
	Name o	f Person	at ()	e Telephone Number			
Enclos	sed is a check for t	he following amount:					
■ \$2	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

Baker County Poultry and Egg LL				
(Name of the Lim	ted Liability Compa (A Florida Limited)	iny as it now appears of Liability Company)	our records.)	
The Articles of Organization for this Limited I		were filed on 23 Jul	y 2020	and assigned
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited liab	ility company here:	:	
ForeverYoungFarmstead LLC				
he new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the desig	mation "LLC" or th	ne abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	All addresses rema	in the same	
Principal office address MUST BE A STRE	ET ADDRESS)	<u> </u>		
Enter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE</u>	<u>BOX)</u>	All addresses rema	in the same	FILED ZDZO NOY 30 PH
B. If amending the registered agent and/or gent and/or the new registered office addresses		address on our reco	ords, <u>enter the r</u>	name of the new registe
Name of New Registered Agent:	Agent remains	the same	 	
New Registered Office Address:	Address remain			
		Enter Florida	street address	
			, Florida	
		City		Zip Code
lew 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 eing filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability ompany has been notified in writing of this change.

りた If Changing Registered Agent, Signature of New Registered Agent

or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
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			□Change
			☐ Add
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fective date, if other than the	date of filing:	(optional)
ote: If the date inserted in this blo	be specific and cannot be prior to date of filing or more than ck does not meet the applicable statutory filing requi	n 90 days after filing.) Pursuant to 605.020 irements, this date will not be listed a:
ocument's effective date on the De	partment of State's records.	
is filed.	date, but not an effective time, at 12:01 a.m. on the	eartier of: (b) The 90th day after the
23 November	2020	
ated	 :	
	111 1/11	
 	Signature of a member of authorized representative of a m	ember
	· / / · / · /	
	NATHAMIEL J. YOUNG	