L20000262443

(Requeste	or's Name)
(Address)	
(Address)	
(City/Stat	e/Zip/Phone #)
PICK-UP	WAIT MAIL
(Business	s Entity Name)
(Docume	nt Number)
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COVER LETTER

TO: Registration Division of C		·			
Trent Ur SUBJECT:	ie Dariy LLC	·			
SUBJECT.	Name of Lim	ited Liability Company			
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.			
Please return all corres	spondence concerning this matter	to the following:			
	Trent Urie				
		Name of Person			
		Firm/Company	.		
	731 County Road 354				
		Address			
	Mayo F1. 32066				
		City/State and Zip Code		, r	<u>ي</u>
	tu49@cornell.edu			₩	17 1
For further information	E-mail address: (n concerning this matter, please c	to be used for future annual report notificall:	ation)		2920 SEP -8
Trent Uric		802 279-9757 at ()		in.	
Nam	e of Person	Area Code Daytime T	elephone Number		6: 2
Enclosed is a check fo	r the following amount:			;Fr. €	ىد
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &	
Mailing Add Registratio		<u>Street Address:</u> Registration Secti	on		

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

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Trent Urie Dariy LLC (Name of the Limited Liability Compa (A Florida Limited)	iny as it now appears on our records.)	
The Articles of Organization for this Limited Liability Company Florida document number 1.20000262443		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
Trent Urie Dairy LLLC		
The new name must be distinguishable and contain the words "Limited Liabi	hity Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	731 County Road 354	
(Principal office address MUST BE A STREET ADDRESS)	Mayo FL 32066	2020
Enter new mailing address, if applicable:	731 County Road 354	£ -8 ₽ -8
(Mailing address MAY BE A POST OFFICE BOX)	Mayo FL 32066	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the	name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florid	Zin Code

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>	<u>Name</u>	Address	Type of Action
			□Add
			□ Remove
			□Change
			□Add
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			2020 SE Remove - 8
		<u></u>	Change
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		202
		2020 SEF
		<u></u>
E. Effective date, if other than the d (If an effective date is listed, the date must be a listed. If the date inserted in this block document's effective date on the Dep	se specific and cannot be prior to date of filing or to does not meet the applicable statutory fili	(optional) more than 90 days after filing.) Pursuant to 605.0207 (3)(b) ng requirements, this date will not be listed as the
f the record specifies a delayed effective ecord is filed.	date, but not an effective time, at 12:01 a.m.	on the earlier of: (b) The 90th day after the
Dated September 3rd	2020	
The	,	
Trent Urie	ignature of a member or authorized representativ	e of a member
Trent Offe	Typed or printed name of signee	

Filing Fee: \$25.00