## k21000036709

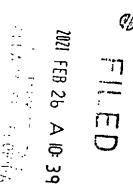
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## **COVER LETTER**

TO:

	Registration Se Division of Cor			
CHBEC	Rockin H F	arm LLC		
SUBJEC"	1:	Name of Lim	ited Liability Company	<del>.</del>
The enclo	sed Articles of	Amendment and fee(s) are sub	mitted for filing.	
		ndence concerning this matter		
		Michael Hodge		
			Name of Person	····
		Rockin H Farm LLC		
			Firm/Company	
		6275 Applegate Ct		
			Address	
	Peachtree Corners, GA 30092			
		<u></u>	City/State and Zip Code	
		mike@rockinhfarmllc.com		
For furthe	r information c	E-mail address: ( oncerning this matter, please or	to be used for future annual report not all:	ification)
Michael I		· ·	678 300-2687	
	Name o	f Person	at () Area Code Daytir	ne Telephone Number
Enclosed	is a check for th	ne following amount:		
□ \$25.0	0 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 (udditional copy is enclosed)
	Mailing Addres Registration S		Street Address: Registration Se	ection
	Division of C		Division of Co	
	P.O. Box 632		The Centre of	
]	Γallahassee, I	rL 32314	2415 N. Monro	oe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Rockin H Farm LLC	
( <u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L21000036709</u>	were filed on January 19th, 2021 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:
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	308 SE August Glen
(Principal office address MUST BE A STREET ADDRESS)	Lake City, FL 32025
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
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 the name of the new registere</u>
Name of New Registered Agent:	
New Registered Office Address:	Emer Florida street address
_ <del></del>	Florida D
	City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	<b></b>

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, 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>	<u>Address</u>	Type of Action
AMBR	Michelle Hodge	6275 Applegate Ct	≣Add
		Peachtree Corners, GA 30092	□Remove
			□Change
			□Add
			□ Remove
			□Change
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			□ Remove
		<del>-,</del>	□Change Ø
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			□Change
		<del></del> -	□Add
			□Remove
			[]Channa

Principal address Zip Code was not registered properly, it should read 32025	
	_
	2021 N. 1
	3.7. <b>B</b>
	<u> </u>
fective date, if other than the date of filing:	(antional) ··· >
in effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90	(optional) days after filing!) Pursua to 605.
ote: If the date inserted in this block does not meet the applicable statutory filing requirence ocument's effective date on the Department of State's records.	nents, this date will nobe liste
	•
ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ear is filed.	lier of: (b) The 90th day after
February 23 2021	
Signature of a member or authorized representative of a memb	
——————————————————————————————————————	per
Signature of a member or authorized representative of a member	

Filing Fee: \$25.00