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(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phor	ne #)
PICK-UP	WAIT	MAIL
(Bı	usiness Entity Na	me)
(Dc	ocument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

	Registration Se Division of Cor		
eup uc	717	MILY RANCH LLC	
SUBJEC	.I:		nited Liability Company
The encle	osed Articles of	Amendment and fee(s) are sub	omitted for filing.
Please ret	turn all correspo	ndence concerning this matter	to the following:
		AMAURY GUERRA GU	TIERREZ
			Name of Person
		G & D FAMILY RANCH	LLC
			Firm/Company
		5714 VINTAGE VIEW BI	LVD
			Address
		LAKELAND . FL 33812	
			City/State and Zip Code
		ACOSTAESTEVEZACCT	
For furthe	er information c	E-mail address: (oncerning this matter, please c	(to be used for future annual report notification)
	Y GUERRA GI		305 742 5842
	Name o	f Person	Area Code Daytime Telephone Number
Enclosed	is a check for th	ne following amount:	
≅ \$25.0	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & ☐ \$60,00 Filing Fee, Certified Copy (additional copy is enclosed)
-	Mailing Addres Registration S		Street Address: Registration Section
]	Division of C	orporations	Division of Corporations
	P.O. Box 632 Tallahassee, I		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

G & D FAMILIY RANCH LLC		
(<u>Name of the Limited Lia</u> (A Flo	ibility Company as it now appears on our records.) orida Limited Liability Company)	
The Articles of Organization for this Limited Liabilit	y Company were filed on 02/01/2021	and assigned
Florida document number L21000054888		
his amendment is submitted to amend the following	ŗ.	
A. If amending name, enter the new name of the	limited liability company here:	
G & D FAMILY RANCH LLC		
The new name must be distinguishable and contain the words "	Limited Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
<u> Principal office address MUST BE A STREET AD</u>	<u> </u>	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX		
		
3. If amending the registered agent and/or registe		
gent and/or the new registered office address her	<u>'e</u> :	2007 1755
Name of New Registered Agent:		35
Nino Danistana LONG a Addan		9
New Registered Office Address:	Enter Florida street address	7 -
		112:
	, Florida _	Zip Gode
	S III	zigi winit

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 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
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove
			🗆 Change
		- <u>3</u>	□Add
			□Remove
			Change
			□Add
			□Remove
			□Change

Effective date, if other than the date of filing: 3 -11 - 20 3 (optional) on effective 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 (once: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as focument's effective date on the Department of State's records. Determine the date of the state of th		
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Signature of a member of suittorized representative of a member	ited .	MARCH 11 . 2021
/ \		Signature of a member of full prized representative of a member
		AMAURY GUERRA