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## **COVER LETTER**

TO: Registration Se Division of Co		•	3	d d
East Indeia	Trading Growers LLC			N
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspondence	ondence concerning this matter	to the following:		
	George David Leidel Jr			
		Name of Person	<del></del>	
	East India Trading Grower	s LLC		
		Firm/Company		
	145 West Center Ave			
		Address	<del></del>	
	Sebring, FL 33870			
	desides unique third see	City/State and Zip Code		
	david@swaineandleidet.cor E-mail address: (	to be used for future annual report noti	fication)	
For further information of	concerning this matter, please c	all;		
George David Leidel Jr		863 381-4738 at () Area Code Daytim		
Name (	of Person	Area Code Daytim	e Telephone Number	
Enclosed is a check for t	he following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	ie of Status &

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

East India Trading Growers LLC		
( <u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Compan	y were filed on <u>06/04/2021</u>	and assigned
Florida document number 1.21000263699		
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
East India Growers LLC		
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
Mailing address <u>MAY BE A POST OFFICE BOX)</u>		
3. If amending the registered agent and/or registered office	address on our records, enter the na-	me of the new registe
gent and/or the new registered office address here:	-	
		سنبيا موج
Name of New Registered Agent:		- 5
New Registered Office Address:	P. J. 12	
	Enter Florida street address	
	, Florida _	
	City	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 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
		,	
			□Remove
			□Change
			□Add
			□Remove
			Change
	·		ElRemove
			□Change
			□Add
			∐Remove
			□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)
(If an 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 605.0207 (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. 2021 August 11 Dated Signature of a member or authorized representative of a member George David Leidel Jr

Filing Fee: \$25.00

Typed or printed name of signee