## 121000310096

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number	)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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07/19/21--01002--008 \*\*25.00

2021 JUL 19 AH 8: 5: SECRETARY OF STATE



## **COVER LETTER**

TO: Registration So Division of Cor			
Plant-42, L	LC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
	ondence concerning this matter		
	Jeffrey Woodburn		
		Name of Person	
	Woodburn & Maine, PLLO		
		Firm/Company	
	204 South Monroe Street S	Suite 201	
		Address	
	Tallahassee, FL 32301		
		City/State and Zip Code	
	jeff@woodburnmaine.com		
	E-mail address: (	to be used for future annual report notifi	ication)
For further information of	concerning this matter, please co	all:	
Jeffrey Woodburn		352 281-5262 at ( )	
Name o	of Person		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)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration	Section	Street Address: Registration Sec	
Division of C		Division of Corp The Centre of Ta	
P.O. Box 632 Tallahassee,			Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Plant-42, LLC		
(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our rec Liability Company)	ords.)
he Articles of Organization for this Limited Liability Company	were filed on 07/07/21	and assigned
lorida document number 1.21000310096		
his amendment is submitted to amend the following:		
If amending name, enter the new name of the limited liab	ility company here:	
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "L	.LC" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)	·-	
		22
		و چې
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		00
		6 S
s. If amending the registered agent and/or registered office gent and/or the new registered office address here:	address on our records, <u>en</u> t	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street ade	lress
		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, <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
AMBR	Mike Wetzer	7810 25th Court E	<b>■</b> Add
		Unit # 106	□Remove
		Sarasota, FL 34243	☐ Change
			□Add
			□ Remove
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Filing Fee: \$25.00