

L21 000310472

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

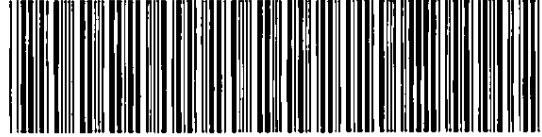
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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03/07/23--01002--003 \*\*60.00

FILED  
TALLAHASSEE, FL

2023 MAR -6 PM 4:09

RECORDING OFFICE  
TALLAHASSEE, FLORIDA

2023 MAR -6 PM 3:40

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RECEIVED

3/6/2023

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Frazier & Son's Family Farm LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jonathan Frazier SR  
Name of Person  
Frazier & Son's Family Farm LLC  
Firm/Company  
1332 Lakecrest Dr  
Address  
Apopka FL 32703  
City/State and Zip Code  
Copley.FrazierLLC@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jonathan Frazier at ( 407 ) 910-8148  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |  |  |   |
|---|--|--|---|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input checked="" type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|---|--|--|---|

**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**

Frazier & Son's Family Farm LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

FILED  
2023 MAR -6 PM 4:09

The Articles of Organization for this Limited Liability Company were filed on 07/07/2021 and assigned  
Florida document number L21000310472.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

Same On File

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:**

Same On File

**(Principal office address MUST BE A STREET ADDRESS)**

**Enter new mailing address, if applicable:**

Same On File

**(Mailing address MAY BE A POST OFFICE BOX)**

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

*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 Changing Registered Agent, Signature of New Registered Agent**

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> | <u>Type of Action</u> |
|--------------|-------------|----------------|-----------------------|
|--------------|-------------|----------------|-----------------------|

|      |                     |                                    |   |
|------|---------------------|------------------------------------|---|
| AMBR | Jonathan Frazier SR | 1332 Lathecrest Dr Apopka FL 32703 | <input checked="" type="checkbox"/> Add |
|------|---------------------|------------------------------------|---|

\_\_\_\_\_ ☐ Remove

\_\_\_\_\_ ☐ Change

|                |                            |   |   |
|----------------|----------------------------|---|---|
| <del>MGR</del> | <del>Shamara Frazier</del> | <del>1332 Lathecrest Dr Apopka FL 32703</del> | <del><input checked="" type="checkbox"/> Add</del> <del>I. F.</del> |
|----------------|----------------------------|---|---|

\_\_\_\_\_ ☐ Remove

\_\_\_\_\_ ☐ Change

\_\_\_\_\_ ☐ Add

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\_\_\_\_\_ ☐ Remove

\_\_\_\_\_ ☐ Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Had to become a authorize signer on the LLC  
I only put my name as the registered agent not  
an authorize signer

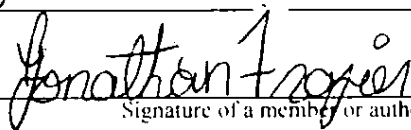
E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

*(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.

Dated 3/5/23



Signature of a member or authorized representative of a member

Jonathan Frazier

Typed or printed name of signer