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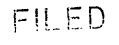
COVER LETTER

Division of Cor				
JBCCR 36				
SUBJECT:	Name of Lim	ited Liability Company		
The analogue Agriches of	A manufactured for(s) are sub-	mittad for Oliva		
	Amendment and fee(s) are sub	_		
Please return all correspo	ondence concerning this matter	to the following:		
	JOSHUA D. MIRON, ESC	Q.		
		Name of Person		
	SHARFI HOLDINGS, INC	C.		
		Firm/Company		
	3731 NE PINEAPPLE AV	'ENUE		
		Address		
	JENSEN BEACH, FL 349	57		
		City/State and Zip Code		
	-	: smccullough@sharfiholding.com	-	
		to be used for future annual report notif	ication)	
For further information c	concerning this matter, please ca	all:		
JOSHUA D. MIRON, ESQ.		954 261-7740 at () Area Code Daytime		
Name of Person		Area Code Daytime	: Telephone Number	
Enclosed is a check for t	he following amount:			
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Address Registration Division of C	Section	Street Address: Registration Sec		
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee		

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**



2022 JAN -3 PH 12: 18

JBCCR 3659, LLC

SECRETARY OF STATE AND SECRETARY OF SECRETARY OF SECRETARY OF SECRETARY OF SECRETARY OF SECRETARY OF SECRETARY OF

The Articles of Organization for this Limited Liability Company	were filed on 9/28/2021	and assigned
Florida document number L21000426055		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liah	oility company here:	
	 	
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	SAME	<u> </u>
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:	SAME	
.,	-	
(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: Name of New Registered Agent:	address on our records	enter the name of the new registered
New Registered Office Address:		
rew regiment office framess.	Enter Florida stree	et address
	, Florida	
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>	
I hereby accept the appointment as registered agent and agi provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	e performance of my du provided for in Chapte	ties, and I am familiar with and r 605, F.S. Or, if this document is

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>	Address	Type of Action
AMBR	CHRISTOPHER STAPLETON	3731 NE PINEAPPLE AVE.	≣ Add
		JENSEN BEACH, FL 34957	Remove
			□Change
			Remove
			□Change
			□Add
			□ Remove
			☐ Change
			□Add
			Remove
			□Change
			□Add
			□Remove
			☐ Change
			□ Add
			Remove

	ignature of a triember or a	uthorized representative	of a member	
DECEMBER 29	, 2021			
rd specifies a delayed effective iled.	date, but not an effectiv	e time, at 12:01 a.m. c	on the earlier of: (b)	The 90th day after the
Tective date is listed, the date must. If the date inserted in this block	be specific and cannot be pack does not meet the app	rior to date of filing or mo dicable statutory filing	ore than 90 days after fil	ing.) Pursuant to 605.0207 (3)
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	tive date, if other than the diffective date is listed, the date must of the date inserted in this block the date on the Depart seffective date on the Depart specifies a delayed effective filed. DECEMBER 29	five date, if other than the date of filing: Tective date is listed, the date must be specific and cannot be properties of the date inserted in this block does not meet the apprenning effective date on the Department of State's reconstructed specifies a delayed effective date, but not an effective iled. DECEMBER 29 2021	tive date, if other than the date of filing: [Tective date is listed, the date must be specific and cannot be prior to date of filing or mo. If the date inserted in this block does not meet the applicable statutory filingment's effective date on the Department of State's records. If the date inserted in this block does not meet the applicable statutory filingment's effective date on the Department of State's records. It is provided that the date of filing: The date of filing or mo. The date is listed, the date of filing: The date of filing or mo. The date of filing: The date	Tective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after fill If the date inserted in this block does not meet the applicable statutory filing requirements, this disent's effective date on the Department of State's records. In the date inserted in this block does not meet the applicable statutory filing requirements, this disent's effective date on the Department of State's records. In the date inserted in this block does not meet the applicable statutory filing requirements, this disent's effective date on the Department of State's records. In the date inserted in this block does not meet the applicable statutory filing requirements, this disent is effective date on the Department of State's records.

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Typed or printed name of signee