Florida Department of State Division of Compositions Electronic Filing Cover Slicet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H230001286703)))



H230001286703ABC\$

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

	Division of Cor Fax Number	: (850)617-6383
From:		
	Account Name	: NELSON MULLINS RILEY & SCARBOROUGH LLP
	Account Number	
	Phone	: (407)839-4200
	Fax Number	: (407)839-4264
	. 1	- Complete hydroge entity to be used for future
*Enter	the email address	s for this business entity to be used for future
ลกเ	nual report maili	ngs. Enter only one email address please.**

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN H&B FLORIDA CATTLE LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

Help

Electronic Filing Menu

Corporate Filing Menu

(H23000128670 3)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

н&в ғі	ORIDA CATTLE, LLC		
	(Name of the Limited Liability Compan- (A Florida Limited L	y us it now appears on our reliability Company)	cords.)
The Articles of Organ Florida document nur	zation for this Limited Liability Company iber L21000427914	were filed on 09/30/2201	and assigned
This amendment is sub	mitted to amend the following:		
A. If amending name	e, enter the new name of the limited liabi	iity company here:	
			دس) دربا
The new name must be dis	inguishable and contain the words "Limited Liabili	ty Company," life designation '	LLC" or the abbreviation "L.L.C.":
Enter new principal (offices address, if applicable:		:
'	(SS MUST BB A STREET ADDRESS)		١٤:
			1,,,
Enter new malling ad	dress, if applicable:		:: 22
_	Y BE A POST OFFICE BOX)		
agent and/or the new	gistered agent and/or registered office a registered office address here: v Registered Agent:	ddress on our records, <u>e</u>	iter the name of the new registere
New Register	ed Office Address:		
•		Enter Florida street ad	ldress
			, Florida
		Clip	, Florida
	s Signature, it changing Registered Agent:		
provisions of all statu accept the obligation being filed to merely ,	pointment as registered agent and agre tes relative to the proper and complete p of my position as registered agent as p reflect a change in the registered office of tified in writing of this change,	performance of my dutic. rovided for in Chapter 6	s, and I am familiar with and 95. F.S. Ov. if this document is
	If Chang	ing Registered Agent, Signati	ers of New Registered Agent

(H23000128670 3) 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 Title Name Address Type of Action MGR Henry C. Yates 3825 Canoc Creek Road St. Cloud, Florida 34772 _____ \exists Remove _____ Change _____ CRemove □ Change □Add Remove _ DChange _____DRemove ____ Change ____ □ Add ____ 🗀 Change _____ 🗆 Add

(H23000128670 3)

Remove

		(H230001286	70 3)
If amo	ending any c	other information, enter change(s) here: (Astach additional sheets, if necessary.)	
			_
_	<u> </u>		
			_
			_
-			_
_			- -
_			_
			
			_
_			<u>', '</u>
-			<i>-</i>
-			-::.
			
-			- :
_	<u></u>		_ ~
_			_
rote:	ir the date in	other than the date of filing:	05.0207 (sted as t
ne recor ord is fil	d specifies a d led.	delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day aft	er the
Dated .		Brenda Parteri Signature of a member or authorized representative of a member	
		Signature of a member or authorized representative of a member	
	BrendaP	drin, Member	

(H23000128670 3)

Typed or printed name of signee