

L21000474637

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

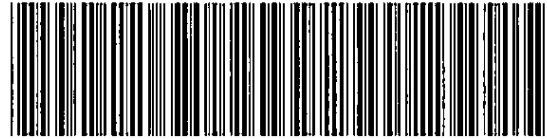
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



800372747788

FILED  
2021 NOV -8 AM 8:25  
SECRETARY OF STATE  
TALLAHASSEE, FL

RECEIVED  
2021 NOV -8 PM 5:15  
ALLAHASSEE, FL



115 N CALHOUN ST., STE. 4  
TALLAHASSEE, FL 32301  
P: 866.625.0838  
F: 866.625.0839  
COGENCYGLOBAL.COM

Account#: I200000000088

Date: 11/08/2021

Name: Merritt Walker

Reference #: 1520615

Entity Name: POINT POND FARM LLC

- ☐ Articles of Incorporation/Authorization to Transact Business
- ☒ Amendment
- ☐ Change of Agent
- ☐ Reinstatement
- ☐ Conversion
- ☐ Merger
- ☐ Dissolution/Withdrawal
- ☐ Fictitious Name
- ☒ Other CERTIFIED COPY OF THE FILING EVIDENCE.

Authorized Amount: \$55

Signature: MW



115 N CALHOUN ST., STE. 4  
TALLAHASSEE, FL 32301  
P: 866.625.0838  
F: 866.625.0839  
COGENCYGLOBAL.COM

Account#: I200000000088

Date: 11/08/2021

Name: Merritt Walker

Reference #: 1520615

Entity Name: POINT POND FARM LLC

- ☐ Articles of Incorporation/Authorization to Transact Business
- ☒ Amendment
- ☐ Change of Agent
- ☐ Reinstatement
- ☐ Conversion
- ☐ Merger
- ☐ Dissolution/Withdrawal
- ☐ Fictitious Name
- ☒ Other CERTIFIED COPY OF THE FILING EVIDENCE.

Authorized Amount: \$55

Signature: *mw*

## POINT POND FARM LLC

**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	Tom Rice	1251 Avenue of the Americas	<input type="checkbox"/> Add
		New York, NY 10020	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AR	Tom Rice	1251 Avenue of the Americas	<input type="checkbox"/> Add
		New York, NY 10020	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

SECRET  
 2011 NOV 17 - 8  
 10:08 AM

2021 NOV -8 AM 8:26  
SECRET  
TALLA 10 0001

SECRET  
NOV - 8 AM 8:26  
TATTA

**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.

Dated November 8 2021

Signature of a member or authorized representative of a member

Typed or printed name of signee