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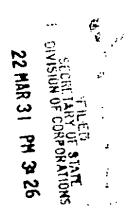
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T. MATTHEWS APR 14 2022

## **COVER LETTER**

TO:

Registration Section Division of Corporations

	O FARM WEDDING & EVENT	VENUE, LLC	
SUBJECT:	Name of Lim	ited Liability Company	<del></del>
The enclosed Articles of	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	Michael J. Barber, Esq.		
		Name of Person	···
	Michael J. Barber, PA		
		Firm/Company	
	808 N. Main St.		
		Address	
	Kissimmee, FL 34744		
		City/State and Zip Code	
	mjb957@embarqmail.com		
	E-mail address: (	to be used for future annual report no	tification)
For further information	concerning this matter, please c	all:	
Michael J. Barber, Esq		407 933-8212 at ()	:
Name	of Person	Area Code Daytir	ne Telephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 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 Addr Registration Division of P.O. Box 6. Tallahassee	Section Corporations 327	Street Address: Registration Se Division of Co The Centre of 2415 N. Monre	rporations

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

I LED SECRETARY OF STATE DIVISION OF CORPORATIONS

22 MAR 31 PM 3 26

HEART D FARM WEDDING & EVENT VENUE, LLC

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

The Articles of Organization for this Limited Liability Comp	pany were filed on <u>Janua</u>	ry 6, 2022	and assigned
Florida document number 1.22000022333			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	liability company here	:	
The new name must be distinguishable and contain the words "Limited	Liability Company," the design	gnation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRES.	<u></u>	<del></del>	
			·-
Enter new mailing address, if applicable:		<u> </u>	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)			à (a
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	fice address on our reco	ords, <u>enter the nam</u>	e of the new registered
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida	street address	
		, Florida	Zip Code
	City		Zip Code
New Registered Agent's Signature, if changing Registered Ag	<u>gent:</u>		
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and compacted the obligations of my position as registered agent being filed to merely reflect a change in the registered of company has been notified in writing of this change.	olete performance of m t as provided for in Cha	v duties, and I am j apter 605, F.S. Or,	familiar with and 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>	Name	Address	Type of Action
MGR	Amanda Davis-Hollingsed	4120 Packard Ave., St. Cloud, FL 34772	<b>=</b> Add
			□Remove
			□Change
			□Add
			Remove
			□Change
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		🗖 Remove	
			□Add
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<del> </del>		
	175347553	
Effective date, if other than the (If an effective date is listed, the date m Note: If the date inserted in this I document's effective date on the limit of the	ust be specific and cannot be prior to date of filing block does not meet the applicable statutory	g or more than 90 days after filing.) Pursuant to 605.0207 (3 y filing requirements, this date will not be listed as th
he record specifies a delayed effection of is filed.	ve date, but not an effective time, at 12:01	a.m. on the earlier of: (b) The 90th day after the
Dated March 28,	2022	
Niclear	Signature of a member or authorized represer	ntative of a member
•	manage of a member of authorized represen	matter of a memoer
Michael J. Barber, Esq		
	Typed or printed name of sig	nec