

L 22 000 278 087

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

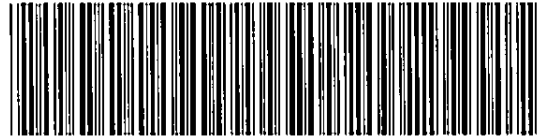
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2024 APR 2 2024 4:49:30

REGISTRATION SERVICE  
CORPORATION  
TALLAHASSEE, FLORIDA

2024 APR -2 PH 4:49

2024 APR -2 PH 4:52

RECEIVED

APR 2 2024

**COVER LETTER**

TO: Registration Section  
Division of Corporations

SUBJECT: Serving Humanity Produce 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:

Kafil Tunsill  
Name of Person

Serving Humanity Produce LLC  
Firm/Company

25 E. Beaver St., Unit 126  
Address

Jacksonville, FL 32202  
City/State and Zip Code

servingshumanity89@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kafil Tunsill at ( 904 ) 717-3187  
Name of Person Area Code Daytime 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 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

Serving Humanity Produce LLC

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

2024 APR 22 PM 4:53

The Articles of Organization for this Limited Liability Company were filed on June 20, 2022 and assigned Florida document number 88-2884349.

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 designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

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

25 E. Beaver St., Unit 126  
Jacksonville, FL 32202

Enter new mailing address, if applicable:

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

25 E. Beaver St., Unit 126  
Jacksonville, FL 32202

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:

Kafil Tunsill

New Registered Office Address:

9201 Hatian Way

*Enter Florida street address*

Jacksonville

*City*

Florida

32221

*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.*

Kafil Tunsill

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>
<u>CTO</u>	<u>Umraan H. Tunsill</u>	<u>1000 Long Island Ave</u>	<input type="checkbox"/> Add
		<u>Fort Lauderdale, FL 33312</u>	<input checked="" type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
<u>CFO</u>	<u>Roger L. Owens</u>	<u>11416 Lumberjack Circle East</u>	<input type="checkbox"/> Add
		<u>Jacksonville, FL 32223</u>	<input checked="" type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
<u>RA</u>	<u>Roger L. Owens</u>	<u>11416 Lumberjack Circle East</u>	<input type="checkbox"/> Add
		<u>Jacksonville, FL 32223</u>	<input checked="" type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
<u>CFO</u>	<u>Kafil H. Tunsill</u>	<u>25 E. Beaver St., Unit 126</u>	<input checked="" type="checkbox"/> Add
		<u>Jacksonville, FL 32202</u>	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
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_____	_____	_____	<input type="checkbox"/> Change
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_____	_____	_____	<input type="checkbox"/> Change

