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(((H24000408004 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : NELSON MULLINS RILEY & SCARBOROUGH, ORLANDO

.....

Account Number : I19980000090 : (407)839-4200 Fax Number : (407)839-4264

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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Fax Services

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN EVANS FAMILY FARM HOLDINGS, LLC

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

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EVANS FAMILY FARM HOLDINGS, LLC		
(Name of the Limited Liability Com (A Florida Limite	pany as it now appears on our i d Liability Company)	records.)
	ny were filed on 10/28/2022	and assigned
Florida document number (12200)404,305		
This amendment is submitted to amend the following:		and assigned and assigned and assigned and assigned
amending name, enter the new name of the limited liability company here: we name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." recompany the designation "LLC" or the abbreviation "LLC." and address MUST BE A STREET ADDRESS) and address MAY BE A POST OFFICE BOX) amending address MAY BE A POST OFFICE BOX) amending the registered agent and/or registered office address on our records, enter the name of the new registered and/or the new registered Agent: Name of New Registered Agent: New Registered Office Address: Enter Florida street address		
The new name must be distinguishable and contain the words "Limited Lia	bility 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)		
Entar new mailing addrage if applicables		Ξ :
<u> </u>		, ,
(Mailing address MAY BE A POST OFFICE BOX)		
		5
	e address on our records, <u>e</u>	inter the name of the new registered
agent and of the new regimered writes that the		
Name of New Registered Agent:		
New Registered Office Address:		
New Negistered Office / Moress.	Enter Florida street a	uldress
		. Florida
	City	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 hability company has been notified in writing of this change.

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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

Fax Services

<u>Title</u>	Name	Address	Type of Action
MGR	LAURA JANE EVANS	1195 East Washington Avenue	₩Add
		Pierson, Florida 32180	-
			[] Change
MGR	MILTON E. EVANS, JR.	1195 East Washington Avenue	₽Add
- "		Pierson, Florida 32180	ErRemove
		 	Change
			□Add
			□Remove
			LIChange
*******			DbACI
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			🗆 Change
			□Add
			[]Remove
			DChange
			□Add
			□Remove

(CC H24000408004 3/1)

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an effective date ote: [f] the dat	is listed, the date most be s	e of filing: pecific and cannot be prior to a fues not meet the applicabl ment of State's records	late of filling or more than 9	(optional) Odays after filing.) Ponsum t ments, this date will not b	o 605,020 e listed :
ecord specific is filed.	s a delayed effective dat	e, but not an effective time	at 12:01 a m, on the ca	rlier of. (b) — The 90th day	after th
ned Decemb	ber 10	Legal James dungsta mysiber or mitheriza	Lucia		

Typed or printed name of signee