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		tration Section of Corpor					
SUBJEC	. / 	Ag-Land Partners, LLC					
SUBJEC	-li _						
The encl	osed A	Articles of An	nendment and fee(s) are sub-	mitted for filing.			
Please re	turn a	ll corresponde	ence concerning this matter	to the following:			
			Brett Jenkins				
				Name of Person			
			Ag-Pro				
				Firm/Company			
			P.O. Box 95				
			Boston, GA 31626				
				City/State and Zip Code			
		-	brettjenkins@agproco.com E-mail address: (1	o be used for future annual report notifi	cation)		
For furth	er info	ormation conc	erning this matter, please ca				
Brett Jei	nkins			229 977-7150 at ()			
		Name of Pe	erson		Telephone Number		
Enclosed	l is a c	theck for the f	ollowing amount:				
■ \$25.	00 Fil	ing Fee	S30.00 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:

TO:

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

Ag-Land Partners, LLC (Name of the Limited Liability Company as it now appears on our re (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on December 6, 2022 Florida document number 1.22000512973 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Agland Partners, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address: Enter Florida street address

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.

City

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	
AMRR =	Authorized	Membe

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			Change
<u>.</u>			□Add
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effective date is te: If the date	other than the d listed, the date must b inserted in this bloc ive date on the Dep	e specific and ca k does not me	annot be prior to et the applical	date of filing or role statutory fili	nore than 90 days	after filing.) Purst	ot be listed a
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December led	8	7	2022				
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Typed or printed name of signee

James M. Groover