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COVER LETTER

	ion Section of Corporations		
E&B SUBJECT:	LITTLE THINGS FARM AND	EVENTS LLC	
SUBJECT:	Name of	Limited Liability Company	
The enclosed Artic	les of Amendment and fee(s) are	submitted for filing.	
Please return all co	rrespondence concerning this ma	atter to the following:	
	ERIK R DREKE		
		Name of Person	
		Firm/Company	ria 10
	12301 SW 46 ST		
		Address	8-8
	MIAMI, FL 33175	City/State and Zip Code	
	EBLITTLETHINGSFA	ARM@GMAIL.COM	PH 3: 05 SEE FL
For further informa	E-mail address ation concerning this matter, plea	ess: (to be used for future annual report notification) use call:	
ERIK R DREKE		786 251-7705	
ì	Name of Person	Area Code Daytime Telepho	one Number
Enclosed is a check	k for the following amount:		
■ \$25.00 Filing	Fee S30.00 Filing Fee & Certificate of Statu		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing A</u> Registra	Address: tion Section	Street Address: Registration Section	
Division	of Corporations	Division of Corporatio	
P.O. Bo Tallahas	x 6327 ssee, FL 32314	The Centre of Tallahas 2415 N. Monroe Street	•

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

E&B LITTLE THINGS FARM AND EVENTS LI					_
(<u>Name of the Limited Liability Con</u> (A Florida Limit	npany as it now appea ed Liability Company)	ars on our records.	_)		
The Articles of Organization for this Limited Liability Compa	any were filed on $\frac{F_0}{2}$	ebruary 27, 2023		and	assigned
Florida document number L23000102271					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited li	iability company h	<u>iere</u> :			
E&B LITTLE THINGS FARM LLC					
The new name must be distinguishable and contain the words "Limited Li	ability Company," the	designation "LLC"	or the abbr	eviation	"L.L.C."
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET ADDRESS)				L3	
(Frincipul office dudiess in OSF BE A STREET ADDRESS)	: : :				
					•
Enter you mailing address if applicables				-8	
Enter new mailing address, if applicable:			(2) C)	P:4)
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>	(2)		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address by		on our records,	enter t	he nar	me of the n
Name of New Registered Agent:					
New Registered Office Address:		<u> </u>			
	Enter Fl	orida street address			
		Flo	rida		
	City			Zip Ce	oxle
New Registered Agent's Signature, if changing Registered Age	ent:				

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.

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
			Remove
			Change
			Remove
			Change
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			Remove
			SECTION Change SECTION Change FILE Add
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Tective date, if other than the an effective date is listed, the date must ote: If the date inserted in this blocument's effective date on the December 1.	ock does not me	et the applicab	date of filing or le statutory fili	nore than 90 days	optional) s after tiling.) P s, this date wi	ursuant to If not be l	605.020 listed a
e record specifies a delayed The 90th day after the reco	effective da ord is filed.	te, but not	an effective	time, at 12:	01 a.m. or	the ea	rlier
ated May 1	,	2023	. •				
	./m		ĺ				
all	Signature of a mo	ember of authori	zed representativ	e of a member		_	-