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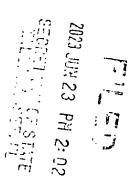
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PICK-UP	☐ WAIT	MAIL
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Special Instructions to Fi	ling Officer:	
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Office Use Only



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Y. SCOTT
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COVER LETTER

	stration Section of Corpo						
	TERRA FIRM	IA PROPERTIES LLC					
SUBJECT: _	1 1. -	Name of Lim	ited Liability Company				
The enclosed a	Articles of Ar	nendment and fee(s) are sub-	mitted for filing.				
Please return a	all correspond	ence concerning this matter	to the following:				
		Terry Hodge					
			Name of Person		.		
		FIRMA TERRA PROPER	TIES LLC				
			Firm/Company	· · · · · · · · · · · · · · · · · · ·		2027	
		12220 S. Ray Pt				2023 JUN	4 9
			Address			23	- FEE
		Floral City, FL 34436			13 m	P∺	
			City/State and Zip Code	····	برين سيان	2: 02	
		THODGE@TERBOGROU				20	
		E-mail address: ()	to be used for future annual re	port notification)			
For further inf	ormation con	cerning this matter, please ca	all:				
Terry Hodge			727 458- at ()	8451			
~	Name of P	erson	Area Code	Daytime Telepho	one Number	_	
Enclosed is a	check for the	following amount:					
■ \$ 25.00 Fil		□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclo		\$60.00 Filing For Certificate of S Certified Copy (additional copy is	tatus &	
Regi	ing Address: istration Se sion of Cor		_	dress: tion Section of Corporatio	ns		
P.O.	Box 6327	•	The Cent	tre of Tallahas	see		
Talla	ahassee, FL	. 32314	2415 N.	Monroe Street	t, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TERRA FIRMA PROPERTIES LLC	
(Name of the Limited Liability Compan (A Florida Limited Lia	y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company w	vere filed on 5/15/2023 and assigned
Florida document number L23000237958	
this amendment is submitted to amend the following:	
If amending name, enter the new name of the limited liabili	ity company here:
FIRMA TERRA PROPERTIES LLC	
he new name must be distinguishable and contain the words "Limited Liability	y 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)	
	023 50 50 50 50 50 50 50 50 50 50 50 50 50
Inter new mailing address, if applicable:	N
Mailing address MAY BE A POST OFFICE BOX)	10 TO 177
	00 mg (→
	-3 0
3. If amending the registered agent and/or registered office ad gent and/or the new registered office address here:	ldress on our records, enter the name of the new regist
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, 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 liability company has been notified in writing of this change.

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
			DAdd
			□Remove
			Change
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ective date, if other than the of effective date is listed, the date must	be specific and	l cannot be pr	ior to date of	filing or more	than 90 days	optional) after filing.)	Pursuan	t to 605.02
te: If the date inserted in this blo ument's effective date on the De				itory filing re	equirements	, this date v	vill not	be listed
cord specifies a delayed effective s filed.	date, but not	an effective	time, at 13	::01 a.m. on	he earlier o	f: (b) The	90th d	y after th
s med.								
June 15		$\frac{2023}{}$						
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	10.50	/ /						

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Filing Fee: \$25.00