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COVER LETTER

Tallahassee, FL 32314

O: Registration Se Division of Cor			
ивјест: Floy		CULLATION CANAL ited Liability Company	LIE_
he enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
'lease return all correspo	ndence concerning this matter	to the following:	
		A Muaum Name of Person	
		Name of Person	
		Firm/Company	
	19032 Dunca	an Court Address	SECRET TO THE PROPERTY OF THE
	Dade Ci	City/State and Zip Code	nail-wm
	Ava McLaw E-mail address: (1	NNFL Deather @ 97 to be used for future annual report softi	nal-wh is
For further information c	oncerning this matter, please ca	all:	
Ava McLa	t Person	at (<u>121</u>) <u>270 - 0</u> Area Code Daytime	6265 e Telephone Number
Enclosed is a check for the	ne following amount:		
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Sectificate of Status & Certificate Copy (additional copy is enclosed)
Mailing Address		Street Address:	otion
Registration Section Division of Corporations		Registration Sec Division of Cor	
P.O. Box 632		The Centre of T	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Florida Hime Ruyer Colled (Name of the Limited Liability Compan (A Florida Limited Liability)	As it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company velorida document number <u>L23000251923</u> .	vere filed on DS 25 2023 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	ity company here:
McLaurin Farms UC The 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office adagent and/or the new registered office address here:	Dade City FL 33523 Dade City FL 33523 Date City FL 33623 Date City FL 33623
Name of New Registered Agent:	1 M McLaunn
New Registered Office Address:	732 Durcah Court Enter Florida street address
Dade	City, Florida 33623 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 Changing Registered Agent, Signature of New Registered Agent

f 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>litle</u>	Name	Address	Type of Action
WGR	Kenneth McLauin	19032 Duncan Court	□Add
		19032 Duncan Court Dade City FL 33623	□ Remove
			Change
			🖸 Add
			□Remove
			□Change
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		-4 P	Remove CRETTO Change
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			□Add
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f amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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fan estective date, if other than the date of filing: fan estective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605. Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be fisted document's effective date on the Department of State's records.	أحمة 0207 (3)(thed as the
e record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after d is filed.	r the
Dated November 1, 2024. Signature of a member or authorized representative of a member	
Ava M WcLaurin Typed or printed name of signee	

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