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(Requestor's Name)
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PICK-UP WAIT MAIL
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Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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Office Use Only

Examples of

COVER LETTER

Registration Section

Division of Corporations

TO:

SUBJECT: High	ands farmer	Madle (IC	
	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	hamaring Ke	rhanst	
		Name of Person	Andrew's BANGON
		Firm/Company	
	160823 Boney 1	Address	
		Address	
	Sebring, FL	33870 City/State and Zip Code	
		City/State and Zip Code	
	info@doxbek	formal/C.Cvm. to be used for future annual report not	· · · · · · · · · · · · · · · · · · ·
			ilication)
For further information e	oncerning this matter, please c	ali:	
hathering Va	donati	at (<u>2,5</u>) <u>378-8</u>	F210D
Patharine Ko	Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for th	e following amount:		
\$25.00 Filing Fee	☐ \$30.00 Filing Fee &	☐ \$55.00 Filing Fee &	☐ \$60.00 Filing Fee,
2 323.00 Tilling Fee	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address		Street Address:	anti a m
Registration S Division of C		Registration Se Division of Cor	
P.O. Box 632	•	The Centre of T	-
Tallahassee, F			oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Highlands farmers M. (Name of the Limited Liability C.) (A Florida Liability C.)	Market (CC	2023 00	T16 AH 7: 18
(Name of the Limited Liability (A Florida Li	Company as it now appears imited Liability Company)	on our records.)	·
The Articles of Organization for this Limited Liability Con			
Florida document number <u>L23000466950</u> .			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	d liability company her	<u>'e</u> :	
The new name must be distinguishable and contain the words "Limited	d Liability Company." the des	signation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRES	<u>ss)</u>		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered o agent and/or the new registered office address here:	ffice address on our rec	cords, <u>enter the na</u>	me of the new register
Name of New Registered Agent:			-
New Registered Office Address:			<u>. </u>
	Enter Florid	la street address	
		, Florida _	
	City		Zip Code
New Registered Agent's Signature, if changing Registered A	<u>sgent:</u>		
hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and compacted the obligations of my position as registered agent being filed to merely reflect a change in the registered company has been notified in writing of this change.	iplete performance of n nt as provided for in Ch	ny duties, and I am hapter 605, F.S. Oi	familiar with and r, if this document is

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>	<u>Name</u>	Address	Type of Action
MGR	Jane Benham	405 S. Egret St.	XAdd
		405 S. Egret St. Selving, FL 33890	Remove
			□Change
			□Remove
			[Change
			□Add
			□Remove
			□Change
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ote:	ive date, if other than the date of filing:
ecore is fil	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ted_	arrober 12 , 2023.
	Thos
	Signature of a member or authorized representative of a member
	Katharine Hoch and Typed or printed name of signee