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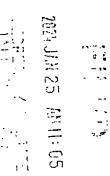
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COVER LETTER

Division of Cor			
JBG GROV	vers, llc		
SUBJECT:	Name of Lim	nited Liability Company	
The enclosed Articles of .	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Jennifer L. Strickland, Par	ralegal	
	· · ·	Name of Person	
	Mark A. Perry, PA		. ~ 2
		Firm/Company	TAN DEC
	88 NE 5th Avenue		-17
		Address	
	Delray Beach, FL 33483		
	jstrickland@markaperrypa.	City/State and Zip Code	2021 JAM 25 ANTH 05
	• • • • • • • • • • • • • • • • • • • •	(to be used for future annual report notification)	
For further information c	oncerning this matter, please o	call:	
Jennifer L. Strickland, Pa	nrallegal	561 276-4146 at ()	
Name o	f Person	Area Code Daytime Telephone	Number
Enclosed is a check for th	ne following amount:	1;	
\$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	50.00 Filing Fee, Certificate of Status & Certified Copy additional copy is enclosed)
Mailing Addres Registration S	_	Street Address: Registration Section	
Division of C	orporations	Division of Corporations	
P.O. Box 632	.7	The Centre of Tallahasse	e

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JDG GROWERS, LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited L	ny as it now appears on our records.) hability Company)	
The Articles of Organization for this Limited Liability Company	were filed on January 5, 2024	and assigned
lorida document number L24000015337		
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited liabi	lity company here:	
he new name must be distinguishable and contain the words "Limited Liabil	ity Company." the designation "LLC" or	the abbreviation "L.L.C."
Inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		10 D
		25
Inter new mailing address, if applicable:		77
Mailing address MAY BE A POST OFFICE BOX)	<u> </u>	(1)(1)
		7. A. S.
 If amending the registered agent and/or registered office a gent and/or the new registered office address here: 	address on our records, enter the	name of the new register
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Floric	la
	C44 F	LID COUR

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

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	<u>Address</u>	Type of Action
MGR	LIONEL J. GRAY	15321 Lyons Road	□Add
		Delray Beach, FL 33446	■Remove
			□Change
MGR	JONATHAN DEXTER GRAY	15321 Lyons Road	Add
		Delray Beach, FL 33446	□Remove
			☐ ☐ ☐ Add
			227 □Remove
			\ \ Add
			□Remove
			Change
			□Add
			□ Remove
		 	□Change
			□.Add
			□Remove
			□ Change

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Signature of a member or authorized representative of a member	is filed.	ry 15				_			
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Filing Fee: \$25.00