L14000317696

(Requestor's Name)
(Address)
(Address)
(Addiess)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(======================================
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer

Office Use Only



400434624034

08/13/24++01016++024 **30.00

SECRETARY OF STATE TALLAHASSEE, FL

2024 AUG 13 PM 2: 48

COVER LETTER

TO:	Registration Section
	Division of Corporations

Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: JANIE CASTILLO	SUBJECT:	30D HARVESTING LLC				
Please return all correspondence concerning this matter to the following: JANIE CASTILLO Name of Person CASTILLO PAYROLL & TAX SERVICE INC Firm/Company 406 E MAGNOLIA ST Address ARCADIA, FL 34266 City/State and Zip Code CASTILLOPAYROLL@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: JANIE CASTILLO Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: SECORDING SECORDING AVERAGE SECORDING SECORDING SECORDING SECORDING SECORDING SECORDING SECORDING SECORDING CErtificate of Status & Certificed Copy (additional copy is enclosed)		Name of Limi	ted Liability Company			
Please return all correspondence concerning this matter to the following: JANIE CASTILLO Name of Person CASTILLO PAYROLL & TAX SERVICE INC Firm/Company 406 E MAGNOLIA ST Address ARCADIA. FL 34266 City/State and Zip Code CASTILLOPAYROLL@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: JANIE CASTILLO Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: SECOND Filing Fee & Certificat of Status & Certificat Copy (additional copy is enclosed)	The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing			
JANIE CASTILLO Name of Person CASTILLO PAYROLL & TAX SERVICE INC Firm/Company 406 E MAGNOLIA ST Address ARCADIA, FL 34266 City/State and Zip Code CASTILLOPAYROLL@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: JANIE CASTILLO Name of Person Area Code Daytime Telephone Number F. CATILLOPAYROLL@GMAIL.COM Daytime Telephone Number SECRETARY Area Code Daytime Telephone Number F. CATILLOPAYROLL@GMAIL.COM SECRETARY OF STATE SECRETARY OF CATILLOPAYROLL@GMAIL.COM CONTINUE CASTILLO Name of Person SECRETARY OF CATILLOPAYROLL@GMAIL.COM CONTINUE CASTILLOPAYROLL@GMAIL.COM SECRETARY OF CASTILLOPAYROLL@GMAIL.COM E-mail address: (to be used for future annual report notification) SECRETARY OF CASTILLOPAYROLL@GMAIL.COM CONTINUE CASTILLOPAYROLL@GMAIL.COM SECRETARY OF CASTILLOPAYROLL@GMAIL.COM CONTINUE CASTILLOPAYROLL@GMAIL.COM SECRETARY OF CASTILLOPAYROLL@GMAIL.COM SECRETARY OF CASTILLOPAYROLL@GMAIL.COM SECRETARY OF CASTILLOPAYROLL@GMAIL.COM SECRETARY OF CASTILLOPAYROLL@GMAIL.COM CONTINUE CASTILLOPAYROLL@GMAIL.COM SECRETARY OF CASTILLOPAYROLL@GMAIL.COM CONTINUE CASTILLOPAYROLL@GMAIL.COM SECRETARY OF CASTILLOPAYROLL@GMAIL.COM CONTINUE CASTILLOPAYROLL@GMAIL.COM SECRETARY OF CASTILLOPAYROLL@GMAIL.COM CONTINUE CASTILLOPAYROLL@GMAIL.COM SECRETARY CONTINUE CASTILLOPAYROLL@GMAIL.COM SECRETARY OF CASTILLOPAYROLL@GMAIL.COM CONTINUE CASTILLOPAYROLL@GMAIL.COM SECRETARY OF CASTILLOPAYROLL@GMAIL.COM CONTINUE CASTILLOPAYROLL@GMAIL.COM SECRETARY OF CASTILLOPAYROLL@GMAIL.COM CONTINUE CASTILLOPAYROLL@GMAIL.COM SECRETARY OF CASTILL			•			
Name of Person CASTILLO PAYROLL & TAX SERVICE INC Firm/Company 406 E MAGNOLIA ST Address ARCADIA, FL 34266 City/State and Zip Code CASTILLOPAYROLL@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: JANIE CASTILLO Name of Person Address ARCADIA, FL 34266 City/State and Zip Code CASTILLOPAYROLL@GMAIL.COM E-mail address: (to be used for future annual report notification) ALLE TAY AVIV OF STATE Area Code Daytime Telephone Number SECOND Filing Fee Certificate of Status & Certificate Copy (additional copy is enclosed) Certificate of Status & Certificate Of Systems & Certificate Of Syst	Please return all correspo	ndence concerning this matter t	to the following:			
CASTILLO PAYROLL & TAX SERVICE INC Firm/Company 406 E MAGNOLIA ST Address ARCADIA, FL 34266 City/State and Zip Code CASTILLOPAYROLL@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: JANIE CASTILLO Name of Person Name of Person SECR 24 AUG 13 PM 2: 48 Area Code Daytime Telephone Number For Signal address: (To be used for future annual report notification) Area Code Daytime Telephone Number FOR STATE SECR 25 AUG OCCUPATION CETTIFICATION SECR 25 AUG OCCUPATION SECR 25 AUG OCCUPATION CETTIFICATION CETTIFICATION CETTIFICATION (additional copy is enclosed)		JANIE CASTILLO				
Firm/Company 406 E MAGNOLIA ST Address ARCADIA, FL 34266 City/State and Zip Code CASTILLOPAYROLL@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: JANIE CASTILLO Name of Person Name of Person Area Code Certificate of Status & Certificate Of S			Name of Person			
ARCADIA. FL 34266 City/State and Zip Code CASTILLOPAYROLL@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: JANIE CASTILLO Name of Person Name of Person Area Code S55.00 Filing Fee & S50.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed) City/State and Zip Code CASTILLOPAYROLL@GMAIL.COM E-mail address: (to be used for future annual report notification) ARCADIA. FL 34266 City/State and Zip Code CASTILLOPAYROLL@GMAIL.COM E-mail address: (to be used for future annual report notification) ARCADIA. FL 34266 CASTILLOPAYROLL@GMAIL.COM E-mail address: (to be used for future annual report notification) ARCADIA. FL 34266 ARCADIA. FL 34266 CASTILLOPAYROLL@GMAIL.COM ARCADIA. FL 34266 ARCADIA. FL 34266 CASTILLOPAYROLL@GMAIL.COM ARCADIA. FL 34266 ARCADIA. FL 34266 CASTILLOPAYROLL@GMAIL.COM ARCADIA. FL 34266 ARCAD		CASTILLO PAYROLL &	TAX SERVICE INC			
ARCADIA. FL 34266 City/State and Zip Code CASTILLOPAYROLL@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: JANIE CASTILLO Name of Person Area Code Daytime Telephone Number For Full Address: (to be used for future annual report notification) Area Code Daytime Telephone Number For Full Address: (to be used for future annual report notification) Area Code Daytime Telephone Number For STATE Code Section Status & Certified Copy (additional copy is enclosed) Certified Copy			Firm/Company			
ARCADIA, FL 34266 City/State and Zip Code CASTILLOPAYROLL@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: JANIE CASTILLO Name of Person Name of Person Name of Person Name of Person SECRETARY AFRA Code Daytime Telephone Number FL F		406 E MAGNOLIA ST				
City/State and Zip Code CASTILLOPAYROLL@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: JANIE CASTILLO Name of Person Name of Person Name of Person S263 494-0245 Area Code Daytime Telephone Number FOR CASTILLO Area Code Daytime Telephone Number FOR CASTILLO Area Code Code Code S255.00 Filing Fee & S60.00 Filing Fee. Certificate of Status Certificate Of Status & Certified Copy (additional copy is enclosed) Certified Copy		-	Address			
CASTILLOPAYROLL@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: JANIE CASTILLO Name of Person Name of Person Name of Person SECRETARY AUG AVA SECRETARY AUG AVA SECRETARY AUG AVA AVA AVA AVA AVA AVA AVA		ARCADIA, FL 34266				
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: JANIE CASTILLO Name of Person Name of Person Area Code Daytime Telephone Number For Area Code Daytime Telephone Number Statistics Continued annual report notification) Area Code Daytime Telephone Number For Area Code Code Daytime Telephone Number For Area Code Co			•	_ -		
For further information concerning this matter, please call: JANIE CASTILLO Name of Person Name of Person Area Code Daytime Telephone Number FINAL Area Code Daytime Telephone Number Statistical Copy Certificate of Status Certified Copy (additional copy is enclosed)		<u>-</u>				
Name of Person Area Code Daytime Telephone Number Daytime Telephone Number Solution Solution Solution Solution Solution Solution Solution Area Code Daytime Telephone Number Solution		E-mail address: (t	o be used for future annual report notification)	' ।]@ ? 4	
Name of Person Area Code Daytime Telephone Number Daytime Telephone Number Solution Solution Solution Solution Solution Solution Solution Area Code Daytime Telephone Number Solution	For further information co	oncerning this matter, please ca	III:	RET	AUG	1
☐ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee. Certificate of Status ← Certified Copy ← Certificate of Status ← Certified Copy ← Certifi	JANIE CASTILLO			HAX YSA	$\overline{\omega}$	Files
☐ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee. Certificate of Status ← Certified Copy ← Certificate of Status ← Certified Copy ← Certifi	Name o	f Person	Area Code Daytime Teleph	none Number (C) C) C	PH 2: 4	
Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy	Enclosed is a check for th	ne following amount:		m m	ထ	
, , , , , , , , , , , , , , , , , , ,	□ \$25.00 Filing Fee		Certified Copy	Certificate of Status &		

Mailing Address:

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PEORIDA SOD HARVESTINO LLC	
(Name of the Limited Liability (A Florida I	Company as it now appears on our records.) Limited Liability Company)
The Articles of Organization for this Limited Liability Co Florida document number £24000317696	ompany were filed on 07/17/2024 and assigned and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limit	ed liability company here:
N/A	
The new name must be distinguishable and contain the words "Limit	ed Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	N/A
(Principal office address MUST BE A STREET ADDRE	<u></u>
Enter new mailing address, if applicable:	N/A
(Mailing address MAY BE A POST OFFICE BOX)	<u></u>
B. If amending the registered agent and/or registered	office address on our records, enter the name of the new Fegistered
agent and/or the new registered office address here:	
Name of New Registered Agent: N/A	H 2: L8
New Registered Office Address:	Enter Florida street address
	, Florida

New Registered Agent's Signature, if changing Registered Agent:

ELOBEDA COD HABVECTING LLC

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.

Cin

Zip Code

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
AMBR	REY L MIER	3140 HAMPTON RD.	
		WAUCHULA, FL 33873	≣Remove
			□Change
			□ Remove
			Change
			□Add
			SECRED Charge
			SECRETARY STATE TALLIAHASSEE, FU
			□Change
			□Add
			□ Remove
			□Change
			□Add

	**** <u>****</u>		
	<u> </u>		
		· · · · · · · · · · · · · · · · · · ·	
<u>_</u>			
<u> </u>			
			
		·	
			TP SEC SEC
		.	ZIIZ4 AUG SECRETI TALLA
			RETARY OF
· · · · · · · · · · · · · · · · · · ·			- 20
ective date, if other than the	08/07/2024	(antional)	2: 49 STAT E, FL
offective date is listed, the date mus	st be specific and cannot be prior to date of fill lock does not meet the applicable statute	(optional) ling or more than 90 days after filing.) Proory filing requirements, this date will	ursuant 107 505.020
cord specifies a delayed effectiv i filed.	ve date, but not an effective time, at 12:0	Of a.m. on the earlier of: (b) The 9	0th day after the
ed AUGUST 7.	2024		
V //	1,1		
λ //.	nathan A Casana Signature of a member or authorized repres		

Typed or printed name of signee