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| (Re | equestor's Name) | |
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| (Ad | dress) | |
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| (Cit | y/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nan | ne) |
| (Do | cument Number) | |
| Certified Copies | Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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From the desk of Lou Mayer Tel (727) 441-1194 Fax (727) 447-4544 Cell (727) 798-6860

To

Art Kirby

133 Dawn Lauren Ln

Tallahassee, FL 32301

Tel No.

850-942-6537

Date

July 1, 2003

Re

Div. Of Corporations - Walk-in filing

Davinci Farms, LC

Hi Art,

Enclosed is the following to be filed:

Articles of Amendment To Articles Of Organization Of Davinci Farms, LC

- 1. File the original (1 page) with payment of \$25.00.
- 2. Have the duplicate <u>stamped</u> by them for my file and fax it to me at your carliest convenience. I <u>must</u> have a stamped copy.
- 3. Mail the copy to me with the other forms.
- 4. I believe they have a cover letter for us. Please request it.

Statement of Change Of Registered Office Or Registered Agent Or Both For Limited Liability Company

- 5. File the original (1 page) with payment of \$25.00.
- 6. Have the duplicate <u>stamped</u> by them for my file and fax it to me at your earliest convenience. I <u>must</u> have a stamped copy.
- 7 Mail the copy to me with the other forms.
- 8 I believe they have a cover letter for us. Please request it.

FILEO SECRETARY OF STATE DIVISION OF CORPORATIONS

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

03 JUL -3 AMII: 30

| | DAVINCY FARMS, LC |
|---------|---|
| | (Present Name) (A Florida Limited Liability Company) |
| | |
| | |
| | |
| FIRST: | The date of filing of the articles of organization was TANUARY 4, 1995 |
| SECOND: | The following amendment(s) to the articles of organization was/were adopted by the limited liability company: |
| | DELETE, JEAN B. EBY, MANAGER |
| | DELETE, JEAN B. EBY, MANAGER. ADDITION, CHARLES S. EBY, MANAGER |
| | , , , , , , , , , , , , , , , , , , , |
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| | |
| Francis | JUNE 25 , 2003. |
| Dated | JUNIO PS , POUD |
| | T (M |
| | Signature of a member or authorized representative of a number |
| | G.T. MAYER Typed or printed name of signee |
| | Typed or printed name of signee |

Filing Fee: \$25.00