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SECRETARY OF STATE TALLAHASSEE, FL

O SIMMONS APR 2 1 2022

COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT:	57 F	Acrès LLC	
	Name of Lim	ited 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:	
	Ricado) Arme of Person	
		Name of Person	
	57	Acres	
		Firm/Company	
	<u> 2395 0</u>	ld Pro Trail	
		Address	
	- tleming	City/State and Zip Code	<u> </u>
	E-mail address: (t	Services @ (waw) to be used for future annual report no	tification)
For further information co	oncerning this matter, please ca	J	,
Ricardo	Jones	at (904_) 735	- 3435
Name of	Person	Area Code Dayti	me Telephone Number
Enclosed is a check for th	e following amount:		
\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

2022 APR -7 AM 6: 41

FILED

F	57 Acres LLA	SECRETARY OF STATE
(Name of the Limited I (A f	Liability Company as it now appears on Florida Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liabi	lity Company were filed on <u>iVOV</u>	
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the	e limited liability company here:	
The new name must be distinguishable and contain the words	s "Limited Liability Company," the design	ation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	e:	
(Principal office address MUST BE A STREET A	ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u></u>	
	 	
B. If amending the registered agent and/or registered agent and/or the new registered office address h		ds, enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida s	treet address
-	City	, Florida 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 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	Ricardo Jones	2395 Old Pine Trail	52 Add
		Figning Toland, FL 32003	□Remove
	D		Change
AMBR	Mariah Jones	2395 Old Pine Trail	□Add
		Flewing Toland, FL 32003	Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			🗀 Add
		□Remove	
		□Change	
			□Add
			□Remove
			□ Change

am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	Please add myself (The suner, and legistated
	Arrent) Ricardo A Jones as an Authorized
	Member (Alvisid). Also remove Marah Tones
	from list of members lowers
	Trous (1) 1 Dis Ark Williams (1)
۲	
n e	tive date, if other than the date of filing:
	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as nent's effective date on the Department of State's records.
	ord 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
is f	îled.
	30th of March, 2022.
itec	1 30 of Moveh, 2022.
	Mana a Momes
	Signature of a member or authorized representative of a member
	Digarda Altra
	Typed or printed name of signee