75% 1059 0 15 Pagl - 161 Florida Department of State

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Division of Corporations (850) 617-6380

GASSMAN & ASSOCIATES, P.A. Fax Number

Account Number 075350000514 : (727)442-1200 Account Name : (727) 443-5829

phone Fax Number

MERGER OR SHARE EXCHANGE

BLOCKER RANCH, L.L.C. AM 8: 00

Certificate of Status Certified Copy \$120.00 Page Count 9,50.00

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JUN 17 2008

EXAMIN

Certificate of Merger For Florida Limited Liability Company

FIRST: The exact name, form/entity follows:	y type, and jurisdiction	for each <u>merging</u> party are as
Name 1	Jurisdiction	Form/Entity Type
BLOCKER RANCH DE, L.L.C.	Delaware	limited liability company
	•	,
SECOND: The exact name, form/en	ntity type, and jurisdicti	on of the surviving party are
	ntity type, and jurisdicti	on of the <u>surviving</u> party are <u>Form/Entity Type</u>

THIRD: The attached plan of merger was approved by each domestic corporation, limited liability company, partnership and/or limited partnership that is a party to the merger in accordance with the applicable provisions of Chapters 607, 608, 617, and/or 620, Florida Statutes.

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SECRETARY OF STATE

FOURTH: The attached plan of merger was approved by each other business entity that is a party to the merger in accordance with the applicable laws of the state, country or jurisdiction under which such other business entity is formed, organized or incorporated.	
FIFTH: If other than the date of filing, the effective date of the merger, which cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State:	
June 17, 2008	
SIXTH: If the surviving party is not formed, organized or incorporated under the laws of Florida, the survivor's principal office address in its home state, country or jurisdiction is as follows:	
SEVENTH: If the survivor is not formed, organized or incorporated under the laws of Florida, the survivor agrees to pay to any members with appraisal rights the amount, to which such members are entitles under ss.608.4351-608.43595, F.S.	
EIGHTH: If the surviving party is an out-of-state entity not qualified to transact business in this state, the surviving entity:	Ţ
a.) Lists the following street and mailing address of an office, which the Florida Department of State may use for the purposes of s. 48.181, F.S., are as follows:	
Street address:	
Malling address:	
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b.) Appoints the Florida Secretary of State as its agent for service of process in a proceeding to enforce obligations of each limited liability company that merged into such entity, including any appraisal rights of its members under ss.608.4351-608.43595, Florida Statutes.

NINTH: Signature(s) for Each Party:

Name of Entity/Organization:	Typed or Printed gnature(s): Name of Individual:
BLOCKER RANCH DE, L.L.C.	Curtis D. Blocker, Jr.
BLOCKER RANCH, L.L.C.	Curtis D. Blocker, Jr.

Corporations: Chairman, Vice Chairman, President or Officer (If no directors selected, signature of incorporator.)

Signature of a general partner or authorized person General partnerships:

Signatures of all general partners Florida Limited Partnerships:

Non-Florida Limited Partnerships: Signature of a general partner

Limited Liability Companies: Signature of a member or authorized representative

Fees:	For each Limited Liability Company:	\$25.00
-	For each Corporation:	\$35,00
	For each Limited Partnership:	\$52,50
	For each General Partnership:	\$25,00
	For each Other Business Entity:	\$25.00

Certified Copy (optional):

\$30.00

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PLAN OF MERGER

<u>FIRST:</u> The exact name, form/entity follows:	type, and jurisdiction fo	or each <u>merging</u> party are as
<u>Name</u>	<u>Jurisdiction</u>	Form/Entity Type
BLOCKER RANCH DE, L.L.C.	Delaware	limited liability company
	2144	
SECOND: The exact name, form/en as follows:	tity type, and jurisdictio	n of the <u>surviving</u> party are
<u>Name</u>	<u>Jurisdiction</u>	Form/Entity Type
BLOCKER RANCH, L.L.C.	Florida	limited liability company
THIRD: The terms and conditions of	f the merger are as follo	· · · · · · · · · · · · · · · · · · ·
The constituent entitles hereby		
with and into the Surviving Ent	ity, and the Surviving	g Entity shall be a single
entity. The Surviving Entity s	shall be the entity c	ontinuing after the
merger, and the separate exis	stence of the Mergi	ng Entity shall cease
on the effective date of this A	greement.	
	- 1	
		* ± *****
(Attach ad	ditional sheet if necessar	ກນ)

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SECRETARY OF STATE

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Since all of the own	ërship interests o	f the Merg	ing Compa	ny are ci	irrently	owine	əd
by the same Membe	 	<u>_</u>		-			
Surviving Company	y, no additional o	wnership	interests n	éed be i	- ssueď	by the	-
Surviving Company	to reflect the ow	nership in	terësts of t	he Mem	bers a	fter th	e
effective date of the	merger,						
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or other securities of a obligations or others	asis of converting reach merged party is	ights to acq	uire the inte	interests	, shares	3,	13
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