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D. BRUCE

OCT 3 0 2009

EXAMINER

COVER LETTER

	of Corporations	
SUBJECT:	Blue Head Ranch, LLC	
	Name of Limited Liability Company	
The enclosed Artic	cles of Amendment and fee(s) are submitted for filing.	
Please return all co	orrespondence concerning this matter to the following:	
•	Yvonne Bunce, Corporate Secretary	
•	Name of Person	
	Atlantic Blue Group, Inc.	
	Firm/Company	
PO Box 1318 Address		<u></u>
		99 SEC
	Lake Wales, FL 33859-1318	PIL 09 OCT 29 SECRETARY ALLAHASSE
City/State and Zip Code vbunce@atlanticblue.us		ARY SSE SSE
		CT 29 PM RETARY OF SHASSEE, FL
- 0 d d 0	E-mail address: (to be used for future annual report notification)	
For further informa	ation concerning this matter, please call:	30 ATE RIDA
Yvonne l	Bunce, Corporate Secretary at (863) 679 9595	
1	Name of Person Area Code & Daytime Telephone Number	
Enclosed is a chec	k for the following amount:	
\$25.00 Filing F	Certificate of Status Certified Copy Certificate (additional copy is enclosed) Certified Co	of Status &
	MAILING ADDRESS: STREET/COURIER ADDRESS: Registration Section Registration Section	

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

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Blue Head Ranch, LLC		
(Name of the Lim	ited Liability Company as it now appe (A Florida Limited Liability Company	ars on our records.)	
The Articles of Organization for this Limite	d Liability Company were filed on	April 30, 2002	and assigned
Florida document numberL020000	0010314		
This amendment is submitted to amend the	following:		
A. If amending name, enter the new nam	e of the limited liability company h	ere:	
The new name must be distinguishable and end "L.L.C."	I with the words "Limited Liability Com	pany," the designation "L	LC" or the abbreviation
Enter new principal offices address, if ap	plicable:		O OC
(Principal office address MUST BE A STR	REET ADDRESS)		129 NSSE
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE			PH 1: 30
B. If amending the registered agent a registered agent and/or the new registered		our records, enter the	ne name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	E	Enter Florida street addr	ess
	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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member <u>Title</u> <u>Name</u> <u>Address</u> **Type of Action** MGR Lisa Jensen PO Box 1318, Lake Wales, FL 33859 ☐ Add MRG Yvonne Bunce PO Box 1318, Lake Wales, FL 33859 ☐ Remove ☐ Remove Remove □Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Addition of Officers: President - Kenneth J. Smith October 28, 2009 Dated __ Signature of a member or authorized representative of a member JD Alexander Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00