

L0600000/3300

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

(Document Number)

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Certificates of Status _____

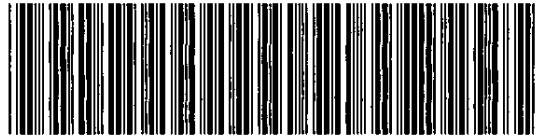
Special Instructions to Filing Officer:

A. LUNT

APR - 9 2008

EXAMINER

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2008 APR - 7 A 7 18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Rochelle Holdings IV, LLC
(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:

James Welborn
(Name of Person)

Rochelle Holdings
(Firm/Company)

10847 Lakeshore Dr.
(Address)

Clermont, FL 34711
(City/State and Zip Code)

For further information concerning this matter, please call:

James Welborn at (407) 875-3400
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the 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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2008 APR -7 A 7:18

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Rochelle Holdings IV, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 2/6/06 and assigned
Florida document number LO6000013300.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Creston Farms, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation
"L.L.C."

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new
registered agent and/or the new registered office address here:**

Name of New Registered Agent:

James Welborn

New Registered Office Address:

10847 Lakeshore Dr.

(Enter Florida street address)

Clermont

(City)

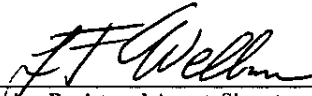
Florida

34711

(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>	<u>Type of Action</u>
MGRM	Payne, Connie J	1900 Summit Tower Blvd, Suite 820 Orlando, FL 32810	☐ Add ☒ Remove
MGRM	Payne, Connie J	10847 Lakeshore Dr. Clermont, FL 34711	☒ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary)

FILED
 2008 APR - 7 A 7 18
 SECRETARY OF STATE
 TALLAHASSEE FLORIDA

Dated April 3, 2008

Signature of a member or authorized representative of a member

James Welborn

Typed or printed name of signee