

MAR. 15. 2011 10:37 AM

JONES FOSTER 561 650 0435

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L1000020915

Florida Department of State
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L. SELLERS

MAR 15 2011

From: Account Name : JONES, FOSTER, JOHNSTON
Account Number : 076077003231
Phone : (561) 650-0471
Fax Number : (561) 650-0431

EXAMINER

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: Star Farms corp@bellsouth.net

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
STAR/JEM VEGETABLES, LLC**

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

STAR/JEM VEGETABLES, 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 FEBRUARY 24, 2010 and assigned Florida document number L10000020975.

This amendment is submitted to amend the following:

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

STAR FARMS/JEM JOINT VENTURE, LLC

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

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

New Registered Office Address:

Enter Florida street address

_____, Florida

City

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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

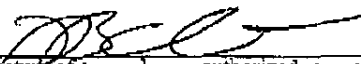
If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|-------------|----------------|---|
| _____ | _____ | _____ | <input type="checkbox"/> Add <input type="checkbox"/> Remove |
| _____ | _____ | _____ | <input type="checkbox"/> Add <input type="checkbox"/> Remove |
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| _____ | _____ | _____ | <input type="checkbox"/> Add <input type="checkbox"/> Remove |
| _____ | _____ | _____ | <input type="checkbox"/> Add <input type="checkbox"/> Remove |

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

Dated March 15, 2011



 Signature of a member or authorized representative of a member
Larry B. Alexander, Authorized Representative

 Typed or printed name of signee