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To:

Division of Corporations

Fax Number : (850)617-6383

From:

1 VIERA WILLIAMS, P.A. Account Name

Account Number : 120090000023

Phone

: (850)222-0013 Fax Number : (850)222-9047

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

Email:	Add	TODAL

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN C DUB HUNT CLUB, LLC

Certificate of Status	0
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Page Count	04
Estimated Charge	\$25.00

COVER LETTER

	stration Section	
SUBJECT:	C DUB HUNT CLUB, LLC	
SOBJECT: _	Name of Limited Liability Company	
The enclosed A	Articles of Amandment and fee(s) are submitted for filing.	
Please return al	ill correspondence concerning this matter to the following:	
	Timothy P. Sparks	
	Name of Person	
	Viera Williams, P.A.	
	Pints/Company	
	701 East Tennossee Street	
	Address	
	Tallahassee, Florida 32308	
	City/State and Zip Code	
	B-mail address: (to be used for future annual report notification)	2017
For further infor	atmation concerning this matter, please call:	JE T
Timothy Sparks	850 222-0013	JAN -3 F
·	Name of Person Area Code Daysime Telephone Number	
Enclosed is a che	heck for the following amount:	φ – –
\$25.00 Filing	TD*	f Status & Py

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tailahassoe, FL 32314 STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, PL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Rame of the Limited Lie	Ollie Commone as it now amone or	aus reports
(A Flo	ollity Company as it now series is on ride Limited Liebility Company)	TXXII INNIANI
The Articles of Organization for this Limited Liability	Company were filed on 06/29/	2011 and assigned
Florida document number 111000075259		•
This amendment is submitted to amend the following:	;	
A. If amending name, enter the new name of the li	mited liability company hore:	
BLKHART RANCH, LLC		
The new name must be distinguishable and contain the words "L	Imited Liability Company," the design	nation "LLC" or the shhrevistion "L.L.C."
Enter new principal offices address, if applicable:		77. 2
(Principal office address MUST BE A STREET ADI	DRESS)	
	· · · · · · · · · · · · · · · · · · ·	
		SSR 1
Enter new mailing address, if applicable:		mark w
(Mailing address MAY BE A POST OFFICE BOX)		777 0
		<u> </u>
		\$ 5
B. If amending the registered agent and/or registered agent and/or the new registered office ad	istered office address on our	r records, enter the name of the
Appendix and the second of the second of the second	en mad kini n	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida si	iresi uddress
	•	. Florida

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 Changing Registered Agent, Signature of New Registered Agent

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each nerson being added or removed from our records:

MGR = M AMBR = A	lanager utborized Member		
Title	Name	Address	Type of Action
			C Rémove
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		•	□ Remove
			Change
			Add
			□ Remove
			201mge SECRE
			Retrove
			OR Change

			Remove
			Change

			□ Веллоуе
			□ Change

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D. If amending any other information	n, enter change(s) bere: (Attach add	titional sheets, if necessary.)	
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		F STAT	O
E. Effective date, if other than the dat (If an effective date is listed, the date must be	e of filing:	(optional)	0007 (7)/5)
Note: If the date inserted in this block in document's effective date on the Depart	does not meet the applicable statutory fi	r more than you days after intage, remains to dos.	d as the
f the record specifies a delayed eff b) The 90th day after the record	fective date, but not an effective is filed.	e time, at 12:01 a.m. on the earlie	er of:
Dated December 20	2016		
	Du		
Sign	alure of a member or authorized representati	ve of a member	
	Derek Whitis Typed or printed name of signee		
	-yp-2 -v p-2002 - 1000 - 1000		
	Page 3 of 3		
	Filing Fee: \$25.00		

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