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COVER LETTER

	Registration S Division of Co						
SUBJECT: PLANT CITY HOLDING COMPANY, L.L.C.							
		Name of Lim	ited Liability Company				
The enclo	osed Articles of	Amendment and fee(s) are su	bmitted for filing.				
Please ret	turn all correspo	ondence concerning this matte	r to the following:				
			James R. Connors				
	Name of Person						
	PLANT CITY HOLDING COMPANY, L.L.C.						
	Firm/Company						
	1380 N. Courtenay Parkway						
			Address				
	Merritt Island, FL 32953						
			City/State and Zip Code				
		E-mail address: (connors@fbfna.com to be used for future annual report notific	ation)			
For furthe	r information c	concerning this matter, please of	call:				
James R. Connors		es R. Connors	at (321)	52-0011			
	Name o	f Person	Area Code & Daytime	Telephone Number			
Enclosed	is a check for th	he following amount:					
\$25.00	Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &		
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		ration Section on of Corporations ox 6327	STREET/COURIE Registration Section Division of Corpora Clifton Building 2661 Executive Cen Tallahassee, FL 323	tions ter Circle	2012 MAR 16 ARI		

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

PLANT CITY HOLDING COMPANY, L.L.C.

(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 l	Liability Company were filed on	1/6/2012	and assigned		
Florida document number L1200000	3037				
This amendment is submitted to amend the fol	lowing:				
A. If amending name, enter the new name	of the limited liability company her	<u>e</u> :			
The new name must be distinguishable and end w "L.L.C."	ith the words "Limited Liability Compa	ny," the designation "L	LC" or the abbreviation		
Enter new principal offices address, if appli	cable:				
(Principal office address MUST BE A STRE	ET ADDRESS)				
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BOX)					
Imating dualess INAT BE A POST OFFICE					
			(/		
B. If amending the registered agent and registered agent and/or the new registered of		our records, <u>enter t</u>	he name of the new		
Name of New Registered Agent:	James R. Connors				
New Registered Office Address:	1380 N. Courtenay Parkway				
	Enter Florida street address				
	Merritt Island	, Florida	32953		
	City		Zip Code		
New Degistered Agent's Signature if shoneing	Dagistaved Agents				

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

Page 1 of 2

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 **Title** Name **Address** Type of Action MRG James K. Guldi 1380 N. Courtenay Parkway ☐ Add ✓ Remove Merritt Island, FL 32953 James R. Connors MGR 1380 N. Courtenay Parkway **✓** Add Remove Merritt Island, FL 32953 ☐ Add Remove Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) ETERY OF STATI March 15 2012 Dated_ Signature of a member or authorized representative of a member James R. Connors Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00