L1400157817

(Re	questor's Name)	
(Ad	dress)	
(* 1.5	u.000,	
-		
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	· #)
PICK-UP		MAIL
_	_ ,	_
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Cortified Conice	Cortificatos	of Status
Certified Copies	_ Certificates	OI Status
	er:	
Special Instructions to	Filing Officer:	ŀ
		1
		ľ
J* - Tolows	Office Use Onl	ly



400265704614

10/28/14--01006--019 **165.00

2014 OCT 29 PH 3: 02

D. BPLUE

Dustin & Stacie Blank 18299 Dusty Lane Estero, FL 33928 FFProduce@hotmail.com (239) 707-9518 (239) 707-6920

October 24, 2014

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

To Whom It May Concern:

Enclosed please find Articles of Amendment to Articles of Organization of <u>B & H</u>

Farms, LLC, First Fruits Farms, LLC and Corkscrew LAL, LLC. Also enclosed is a check payable to Florida Department of State for \$165.00 to pay the filing fee cost and Certified Copy cost on all three amendments. If you have any questions, please do not hesitate to contact one using the contact information above. Thank you.

Sincerely,

Stacie Blank

COVER LETTER

TO: Registration Sec Division of Corp				
B & H Fa	rms, LLC			
SUBJECT:	Name of Limit	ed Liability Company		
The enclosed Articles of A	Amendment and fee(s) are subm	nitted for filing.		
Please return all correspor	ndence concerning this matter to	o the following:		
, ;	Dustin R. Blank			
•		Name of Person		
	B & H Farms, LLC			
	-	Firm/Company		
	18299 Dusty Lane			
		Address		
	Estero, FL 33928			
	_	City/State and Zip Code		72 2
	FFProduce@hotmail.c	com be used for future annual report notificat	ion)	8
For further information co	oncerning this matter, please cal	·	,	1729 F
Dustin R. Blank	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	239 707-6920		2014 OCT 29 PH 3: 02
Name of	n	at ()	lephone Number	_ To i
name or	rerson	Area Code Daytime Te	repnone Number	02 和原
Enclosed is a check for the	e following amount:			
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing I Certificate of Certified Cop (additional copy	Status &

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

B & H Farms, LLC		
(<u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability Conference of Organization for this Limited Liability Conference of Conf	ompany were filed on 10/09/2014 	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ted liability company here:	
The new name must be distinguishable and end with the words "Lin	nited 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 ADDR	ESS)	22
		0 11
		makana.
Enter new mailing address, if applicable:		29
(Mailing address MAY BE A POST OFFICE BOX)		70 7
manning duaress mill built 1051 011102 bordy		5 w
		- 23 - 2
B. If amending the registered agent and/or regist registered agent and/or the new registered office addr		ter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	1
	City	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 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

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	First Fruits Produce, LLC	18299 Dusty Lane	
		Estero, FL 33928	Remove
MGR M	First Fruits Produce, LLC	18299 Dusty Lane	■ Add
		Estero, FL 33928	☐ Remove
MGR	Stacie R. Blank	18299 Dusty Lane	Add
		Estero, FL 33928	■ Remove
AP	Stacie R. Blank	18299 Dusty Lane	2814 C C C C C C C C C C C C C C C C C C C
		Estero, FL 33928	29 Permove SSE SSE SI
			O2
			Add Remove
			□ Remove

		
Effective date, if other than the effective date must be specific the date this document is filed by	n the date of filing: c. cannot be prior to date of receipt or filed date and c the Florida Department of State)	(optional) annot be more than 90 days after
the date this document is filed by	n the date of filing: c. cannot be prior to date of receipt or filed date and c the Florida Department of State)	(optional) annot be more than 90 days after
the date this document is filed by	the Florida Department of State)	
Effective date, if other than The effective date must be specific the date this document is filed by Dated Dustin R. Blar	Signature of a member or authorized represe	

Page 3 of 3

Filing Fee: \$25.00

2014 OCT 29 PH 3: 02