

Jul. 13. 2015 9:06AM  
Division of Corporations

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**L15000088426**  
Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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((H15000169917 3)))



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

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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
WILSON FARMS OF MOSSYHEAD, LLC**

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Jul 13, 2015 9:06AM

No. 0079 H.P. 200169917

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

Wilson Farms of Mossyhead, 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 May 19, 2015 and assigned  
Florida document number L15000088426.

This amendment is submitted to amend the following:

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

The new name must be distinguishable and contain 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)

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**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:

David H. Peek

New Registered Office Address:

1301 Riverplace Boulevard, Suite 1500

Enter Florida street address

Jacksonville

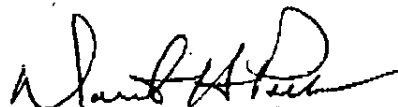
Florida 32207

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

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

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Gail L Wilson		<input type="checkbox"/> Add
		1121 John Sims Parkway E, Niceville, FL 32578	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Hunter C Wilson		<input type="checkbox"/> Add
		1121 John Sims Parkway E, Niceville, FL 32578	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Tyler Blake Wilson	12905 Shirewood Lane, Jacksonville, FL 32224	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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Dated July 13

2015.

2015  
David H. Lee

Signature of a member or authorized representative of a member

David H. Peek

Typed or printed name of signee

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