N19000012868

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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION:	Indation INC		
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are sub	mitted for filing.		
Please return all correspondence concerning this matt	er to the following:		
Christopher Visser			
	(Name of Contact Pers	on)	
Wholly Hemp INC			
	(Firn√ Company)		
583 East State Road 434 Suite 2000			
	(Address)		
Longwood, FL 32750			
	(City/ State and Zip Co	ode)	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
chris@cannabidiollife.com			
E-mail address: (to be used	for future annual repo	rt notification	1)
For further information concerning this matter, please	call:		
Christopher Visser		H)7	3993471
(Name of Contact Persor		Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made p	ayable to the Florida De	epartment of	State:
☐ \$35 Filing Fee ☐\$43.75 Filing Fee & Certificate of Status	■\$43.75 Filing Fee & Centified Copy (Additional copy is enclosed)	Certifi Certifi	Filing Fecticate of Status (ed Copy tional Copy (sed)
Mailing Address Amendment Section		et Address ndment Secti	on
Division of Corporations		sion of Corpo	

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

Hemp For Hope Foundation INC

2022 JAN 25 PH 12: 51

(Name of Corporation as currently filed with the Florida I	Ocpt. of State)	SECRETARY OF SAME
N19000012868		SECRETARY OF SOLUTION ALLAHASSEE, FLORI
(Document Numb	er of Corporation (if know	m)
Pursuant to the provisions of section 617,1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Pi	rofit Corporation adopts the following
A. If amending name, enter the new name of the corporat	ion:	W1
name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	tion" or "incorporated" o	The new r the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	583 East State Road 434	
(Principal office address MUST BE A STREET ADDRESS	Suite 2000	
	Longwood, FL 32750	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	583 East State Road 434	
	Suite 2000	
	Longwood, FL 32750	
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office a Name of New Registered Agent:		ter the name of the
New Registered Office Address:	tFlorid.	a street address)
Sea Registered Office Address.		
	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fai		obligations of the position.
Si	gnature of New Registered	LAgent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove A Add	PT John Do V Mike Jo SV Sally Sr	nes	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
Clunge Add	<u>Director</u>	Zachary J Keenev	630 Ball Street New Smyrna Beach, FL 32168
x Remove			
2) Change Add	Director	Hannah Rence Crawford	150 Wax Myrtle Woods Court 3A Deltona, FL 32525
Remove 3) Change Add Remove			
4) Change Add			
Remove			<u> </u>
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	

•		
<u> </u>		
		
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	41-745 = 1	
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The date of each amendment date this document was signed	(s) adoption: January 19, 2022	if other than the
Effective date if applicable:	January 20, 2022	
· · · · · · · · · · · · · · · · · · ·	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on t	is block does not meet the applicable statutory filing requirem be Department of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/w was/were sufficient for ap	ere adopted by the members and the number of votes east for oproval.	the amendment(s)

adopted by the b	January 19, 2022
Dated	January 19, 2022
Signatu	
O.g.m.	(By the charman or vice charman of the board, president or other officer-if directors
	have not been selected, by an incorporator – if in the hands of a receiver, trustee, or
	other court appointed fiduciary by that fiduciary)
	other court appointed fiduciary by that fiduciary) Christopher Ryan Visser
	Christopher Ryan Visser
	Christopher Ryan Visser

■ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were