361880

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(Ad	dress)	
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2022 AUG 22 PM 4: 38 |

DEC 0 5 2022

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATIO	on: Edgeri	ood Farms, Inc.	
DOCUMENT NUMBER: _	211000		
The enclosed Articles of Am	endment and fee are su	bmitted for filing.	
Please return all corresponde	nce concerning this ma	tter to the following:	
	F	.B. Wilson, Jr.	
	<u> </u>	Name of Contact Person	1
		Firm/ Company	
	278	• •	. TP239
 ,	210	1 NW 77th Blvd Address	7 3.230
		GAINISVIII, FL City/ State and Zip Code	32606
 	•	City/ State and Zip Code	e
		LLGALLE COMCAS	st.rut
Е	-mail address: (to be us	sed for future annual report	notification)
For further information conc	erning this matter, plea	se call:	
Lanra	sallagiur	ar (<u>8</u> 57	de & Daytime Telephone Number
Name of Cont	act Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the fo	ollowing amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing A			Address
Amendmer Division of	it Section Corporations	Amendment Section Division of Corporations	
P.O. Box 6	327	The Co	entre of Tallahassee
Tallahassee, FL 32314		2415 N	N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

	of			
		Farms, Inc.		
(Name of C	Corporation as currently	filed with the Florida	Dept. of State)	
	341880			
	(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	06, Florida Statutes, this <i>F</i>	lorida Profit Corporatio	on adopts the fo	ollowing amendment(s) to
A. If amending name, enter the new nam	e of the corporation:			
	M	¹ A		The new
name must be distinguishable and contain th "Inc.," or Co.," or the designation "Cor "chartered," "professional association," or	e word "corporation," "cop," "Inc," or "Co". A the abbreviation "P.A."	ompany," or "incorporation professional corporation	on name must	contain the word
B. Enter new principal office address, if a (Principal office address MUST BE A STR		N/1 ^P		
				
			·	
C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF		2781 NW 77	th Blvd	
		JP238		
		fairesville,	FL 326	04
D. M	ou unnintered office address			
 If amending the registered agent and/ new registered agent and/or the new r 	egistered office address:	25 III FIOLIDA, CALCE TAC	name of the	
Name of New Registered Agent	N/H			
<u></u>		- 11.1 4.10		
_	1904 MICCOSUKO (Florida sired	et address)		
New_Registered Office Address:	Tallanassee		Florida	37 308
New Acquisition Office 74th cost.		City)		(Zip Code)
New Registered Agent's Signature, if cha	nging Registered Agent:			
I hereby accept the appointment as registered	ea agent. I am Jamitiar w	un ana accepi ine obuga	itions of the po	stiton.
	NIA			·
· · · · •	Signature of New Re	gistered Agent, if changi	ing	
.				

Check if applicable

[☐] The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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 = ChiefExecutive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held.

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, Example:

X Change	PT John Doe		
X Remove	V Mike Jones		
_X Add	SV Sally Smith		
Type of Action (Check One)	Title Nam	nç	<u>Addres</u> s
1) Change Add	<u>s</u> <u>i</u>	aura tallagher	1904 MICLOSUKEC Rd
Remove			tig Tallahasse, FL 32308
2) Change Add			
Remove 3) Remove			
Add			
Remove			
4) Change Add			
Remove			
5) Change			
Add			
Remove			
ົກ Change	_		
Add			
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	heets, if necessary). (Be specific)
	NH
	
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an amendment	provides for an exchange, reclassification, or cancellation of issued shares.
<u>rovisions for in</u>	plementing the amendment if not contained in the amendment itself:
(if not applic	ble, indicate N/A)
	NIA

The date of each amendment(s) ad	option:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amend	ment file date)
Note: If the date inserted in this blocoument's effective date on the Dep		g requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopaction was not required.	oted by the incorporators, or board of directors v	vithout shareholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes c ficient for approval.	ast for the amendment(s)
☐ The amendment(s) was/were appromust be separately provided for a	roved by the shareholders through voting groups each voting group entitled to vote separately on	. The following statement the amendment(s):
	or the amendment(s) was/were sufficient for app	proval
by E.B. Wilso	(voting group)	
· —————	(voting group)	
Dated Hing	ist 17, 2022	
Signature 4	RVI	
(By a di selected	rector, president or other officer – if directors or , by an incorporator – if in the hands of a received fiduciary by that fiduciary)	officers have not been er, trustee, or other court
	E.B. Wilson, Jr.	
•	(Typed or printed name of person sig	ning)
_	President/ Director	
	(Title of person signing)	