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## **COVER LETTER**

TO: Amendment Section Division of Corporations Nature's Way Nursery of Miami, Inc. NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: John M. Leckwood Name of Contact Person The Lockwood Law Firm Firm/ Company 106 E. College Ave. Suite 810 Address Tallahassee, FL 32301 City/ State and Zip Code g.kaminsky@acreageholdings.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: John M. Lockwood Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee □\$52.50 Filing Fee □\$43.75 Filing Fee & ☐\$43.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) Street Address Mailing Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

## **Articles of Amendment** to

## Articles of Incorporation of

Nature's Way Nursery of Miami, Inc.

	Mature's way ive	itsery of Main, ne.		
(Name		ntly filed with the Florida Dept. of Sta	ate)	
	LI	1717		
	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, th	is Florida Profit Corporation adopts th	ne following amendo	neni(s) t
A. If amending name, enter the new na Acreage Florida, Inc.	ame of the corporation:		The ne_	mo
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	"Co". A professional corporation no 1 "P.A."	or the abbreviation	on
B. Enter new principal office address,	if applicable:	c/o The Lockwood Law Firm		_
(Principal office address MUST BE A STREET ADDRESS)		106 E. College Ave. Suite 810		-
		Tallahassee, FL 32301	(O T1	-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		e/o The Lockwood Law Firm		77 77 60
		106 E. College Ave. Suite 810	# 1 Jan	Ö
		Tallahassee, FL 32301	્રું છુ	•
D. If amending the registered agent an new registered agent and/or the new			<u>ie</u>	
Name of New Registered Agent	106 East College Avenu	e Suite 810		
		street address)	<del></del>	
New Registered Office Address:	Tallahassee	, Florid	32312 Ja	_
		(City)	(Zip Code)	_
New Registered Agent's Signature, if c			position.	
	///	///		
	Signature of New	Registered Agent, 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 PVD.

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	<u>PT</u>	John Doe	
X Remove	¥	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Na ne</u>	<u>Addres</u> s
1) Change	DPS	Dawn F. Wilson	6095 SW 128th Street
			Miami , FL 33156
Add X Remove			
2) Change	ОМ	Jennifer Bramblett	11702 SW 106th Ave.
Add			Miami, FL 33176
X Remove			
3 ) Change	CEO	Alfson Depew	16780 SW 280 Street
Add			Homestead, FL 33031
X Remove			
4) Change	DPS	Kevin P. Murphy	366 Madison Avenue, 11th Floor
X Add			New York, NY 10017
Remove			
5) Change		_	
Add		,	
Remove			
6) Change			
	<del></del> -		
Add			
Remove		1	

E. If amending or adding additional Artic	icies_enier_cnauge(s) nere:
(Attach additional sheets, if necessary).	(Be specific)
· · · · · · · · · · · · · · · · · · ·	
·	
	İ
. If an amendment provides for an exchange	nange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
(ij not appacable, matcale WA)	

	Carter than the
The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this block does a document's effective date on the Department of	of meet the applicable statutory filing requirements, this date will not be listed as the State's records.
Adoption of Amendment(s) (CI	IECK ONE)
■ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	shareholders. The number of votes cast for the amendment(s) approval.
	e shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):
"The number of votes cast for the ame	ndment(s) was/were sufficient for approval
by	ing group)
(vo	ing group)
☐ The amendment(s) was/were adopted by the action was not required.	board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the action was not required.	incorporators without shareholder action and shareholder
Dated 2 4 19	
Signature	
	dent or other officer - if directors or officers have not been
	propertor - if in the hands of a receiver, trustee, or other court
appointed fiduciary	1
Dawn F. W	Muthelle
	Typed or printed name of person signing)
President a	nd Secretary
	(Title of person signing)