L62878

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(64), 644, 644, 644, 644, 644, 644, 644,
PICK-UP WAIT MAIL
(Durings Fath Mana)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
P8w
nun

Office Use Only



500308924215

02/12/18--01019--030 **52.50

FEB 2 8 2018 S. YOUNG 18 FEB 28 PH I2: 2
SECRETARY OF STATE
TALLAHASSEE, FLORID



February 13, 2018

JAMES CURRAN 15 MAIN STREET HYDE PARK, NY 12538

SUBJECT: FROSTPROOF GROWERS SUPPLY, INC.

Ref. Number: L62878

We have received your document for FROSTPROOF GROWERS SUPPLY, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Amendments for Florida profit corporations are filed in compliance with section 607.1006, Florida Statutes. Please see the enclosed information.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 118A00003072

Shelia H Young Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: FLUST	BROOF GROW	vers supply INC
	2878	
The enclosed Articles of Amendment and fee are sub	omitted for filing.	
Please return all correspondence concerning this matt	ter to the following:	
JAK	IPS CURRA	. ^
	Name of Contact Person	l
_	FLOOF GLO	
15 Ma	11 Street	
	Address	_
Hype P	AILIC NY	12535
	City State and Zip Code	:
E-mail address: (to be use	ed for future annual report	notification).
For further information concerning this matter, please	e call:	
JAMES CURRAN	at 845	430 - 5887 Se & Daytime Telephone Number
Name of Contact Person	Area Cox	še & Daytime Telephone Number
Enclosed is a check for the following amount made p	ayable to the Florida Depa	rtment of State
□ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fec & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Cops (Additional Cops) is enclosed
Mailing Address Amendment Section		Address ment Section

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

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee. FL 32301

The Section of the Section

Articles of Amendment to Articles of Incorporation

of

- FLOSTPROOF GROW	sexs.	SUPPU	1 =	<u> بی ل</u>				
(Name of Corporation as	currently fi	led with the Fl	orida Dept. of	State)				
L6287	— <i>U</i> —							
(Document N	Number of Co	orporation (if kn	own)					
Pursuant to the provisions of section 607.1006, Florida Statutits Articles of Incorporation:	utes, this Flo	rida Profit Cor _l	voration adopt	s the follow	wing amendo	nent(s)	το	
A. If amending name, enter the new name of the corpora	ation:							
MARK TWAIN FAU	Je STM.	euts.	INC.		The ne	in.		
name must be distinguishable and contain the word "co" "Corp.," "Inc.," or Co.," or the designation "Corp," "In word "chartered," "professional association," or the abbre	nc," or "Co"	". A professioi	r "incorporate nal corporation	ed" or the nume mu	abbrevan ist consult c	int Se		
B. Enter new principal office address, if applicable:		15 n	rain 5	HREE	±			
(Principal office address <u>MUST BE A STREET ADDRES</u>	<u>u</u>)	15 n HyDe	PARK	NU	125	38		
	-							
	-							
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	_							
		1,44			•	•		سور دد
	-	- 	·			•		
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office.	ffice address e address:	in Florida, est	er the name o	f the				
								
Name of New Registered Agent								
	Florida street (adáressi	,					
Nov. Projectored Office Addresses			g·		. <u></u>			
New Registered Office Address:	(Cit	ייח	····		1000	ळ		
					至平	<u></u>		
No. Designated Appendix Storegrams of sharping Designature	ad Agents			2		8	*****	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am	<u>eu Agem:</u> familiar with	and accept the	obligations []	m podla		ထ	רח: !	:
·				•	声灵	32	D	
				•		\sim	v	
Signature	of New Regi	siered Agent, if	changing	,	Fr:	24		•
-	_							

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.

X Change	<u>PT</u>	John Doe				
X Remove	Y	Mike Jones				
X Add	<u>sv</u>	Sally Smith			·	
Type of Action (Check One)	Title	<u>Name</u>			<u>Addres</u> s	
1) Change						
Add						
Remove						<u>.</u>
2) Change			*****			
Add						
Remove			••	•, •		
3) Change					-	
Add						
Remove						
4) Change						
Add	 		•			
Remove						
5) Change		_				<u> </u>
Add						
Remove						
6) Change				معدني وود		
Add						
Remove						

Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)		
			····
	· · · · · · · · · · · · · · · · · · ·		
-			
			
			
	ange, reclassification, or cancellation	of issued shares.	
an amendment provides for an exchi- provisions for implementing the amen (if not applicable, indicate N/A)	dment if not contained in the amend	ment itself:	
provisions for implementing the amen	idment if not contained in the amend	ment itself:	
provisions for implementing the amen	idment if not contained in the amend	ment itself:	
provisions for implementing the amen	idment if not contained in the amend	ment itself:	
provisions for implementing the amen	idment if not contained in the amend		
provisions for implementing the amen	idment if not contained in the amend		

The date of each amendment(s) adoption:	, if other than th
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	will not be listed as th
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by (voling group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and scarrenteet action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action and shareholder action and shareholder action was not required.	
Dated 02/28/2018 Signature Com Presiden	
Signature	<u>7</u>
(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
TAMES P. CURTER (Typed or printed name of person signing)	<u> 5 72.7</u>