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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: S.A.F.E Committ	ice, inc.			
DOCUMENT NUMB	ER: N05000009770				
The enclosed Articles of	of Amendment and fee are su	ibmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	Malcolm S. Wade Jr.				
•		Name of Contact Person	1		
	S.A.F.E Committee, Inc.				
-		Firm/ Company			
	111 Ponce de Leon				
•		Address			
	Clewiston, FL 33440				
•		City/ State and Zip Cod	c		
mwad	e@ussugar.com				
	- -	sed for future annual report	notification)		
		•	·		
For further information	concerning this matter, pleas	se call:			
Malcolm S. Wade, Jr.		at (902-2461 de & Daytime Telephone Number		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	ertment of State:		
■ \$35 Filing Fec	☐S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

S.A.F.E Committee, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N05000009770 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: _, Florida_ (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the 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 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	<u>PT</u>	John Doe	
X Remove	\underline{V}	Mike Jones	
<u>X</u> Ad d	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	PD	Dave Melton	111 Ponce de Leon Avenue
Add			Clewiston, FL 33440
X Remove			
2) Change	PD	Philip Waddell	111 Ponce de Leon
X Add			Clewiston, FL 33440
Remove			
3) Change			
Add		•	
Remove			
4) Change		_	
Add			-
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)			
			 	
				
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	-			
lf an amendment provides for an exch	ange, reclassificatio	on, or cancellatio	on of issued shar	es,
provisions for implementing the ame (if not applicable, indicate N/A)	<u>ndment if not conta</u>	ined in the amer	<u>idment itself:</u>	
		-		
				
		-		
				

The date of each amendment(\$) ado	ption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this artment of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amendme icient for approval.	ent(s)
	oved by the shareholders through voting groups. The following state ach voting group entitled to vote separately on the amendment(s):	ement
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adop action was not required.	ted by the board of directors without shareholder action and shareholder	older
The amendment(s) was/were adop action was not required.	ted by the incorporators without shareholder action and shareholder	
1/8/2 Dated	018	
Signature	Malula & Wilf	
(By a dir selected,	ector, president or other officer – Vairectors or officers have not be by an incorporator – if in the hands of a receiver, trustee, or other of d fiduciary by that fiduciary)	
_	MALCOLM S. WARE JR (Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	SECRETALY	
	(Title of person signing)	