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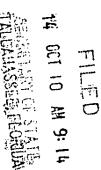
(Re	equestor's Name)	
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R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Shared Abundance Ministries Inc.					
DOCUMENT NUMBER: N0900005892					
The enclosed Articles of Amendment and fee are sub-	mitted for filing.				
Please return all correspondence concerning this matter	er to the following:				
Deborah Morgan					
	(Name of Contact Person	1)			
	(Firm/ Company)				
3905 Washington Road					
<u> </u>	(Address)				
West Palm Beach, Fl 33	3405				
	(City/ State and Zip Cod	e)			
Deborah@palmb	eachharves	t.org			
E-mail address: (to be used	for future annual report	notification)			
For further information concerning this matter, please	call:				
Deborah Morgan	_{*,} 561	310 6641			
(Name of Contact Person)		ode & Daytime Telephone Number)			
Enclosed is a check for the following amount made payable to the Florida Department of State:					
L: \$35 Filing Fee	□\$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	Street Address				
Amendment Section Division of Corporations	Amendment Section Division of Corporations				
P.O. Box 6327 Clifton Building					
Tallahassee, FL 32314		xecutive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

Shared Abundance Ministries, Inc

74 OCT 10 AM 9: 14

(Name of Corporation as currently filed with the Florida Dept. of State) N0900005892

AZCZETAKY OR STATE. NABLAMASCER ELORIDA

(Document Number of Corporation (if known)

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

Palm Beach Harvest, Inc.	The n		
name must be distinguishable and contain the word "corpora" "Company" or "Co." may not be used in the name.	tion" or "incorporated" or the abbreviation "Corp." or "Inc		
B. Enter new principal office address, if applicable:	3905 Washington Road		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	West Palm Beach, FI 33405		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P.O. Box 701		
(Lake Worth, FL 33460		
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:	.		
New Registered Office Address:	(Florida street address)		
	, Florida		
(City)	(Zip Code)		
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fai			
Signature of New	Registered Agent, if changing		

Page 1 of 4

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 X Add	<u>V</u>	John Do Mike Jor Sally Sm	<u>nes</u>		
Type of Action (Check One)	<u>Title</u>		Name		Address
1) Change		_		-	
Add				-	
Remove				-	
2) Change		_		_	
Add				_	
Remove					
3) Change		_		_	
Add				_	
Remove					
4) Changa					
4) Change	- ,	-		-	A
Add Remove				-	
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5) Change		-		-	
Add				-	
Remove					····
6) Change		_			
Add				_	
Remove					

attach additional sheets, if necesso	ıry). (Be specific	hange(s) here:		
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	e date of each amendment(s) adoption:e this document was signed.	, if other than the
	ective date if applicable: 10-09-2014	
	(no more than 90 days after amendment file date)	
Ado	option of Amendment(s) (<u>CHECK ONE</u>)	
	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
	Dated 10/7/14 Depart margan	
	Signature	
	(By the chairman or vice chairman 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)	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	