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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: $_$	ALM BEACH HAF				
N0900	0005892				
DOCUMENT NUMBER:					
The enclosed Articles of Amendme	ent and fee are subn	nitted for filing.			
Please return all correspondence co	oncerning this matte	r to the following:			
Deborah Morgan					
		(Name of Contact Pe	rson)	-	
Palm Beach Harvest Inc					
		(Firm/ Company)		 -
4601 S Flagler Drive					
	****	(Address)	-		
WEST PALM BEACH FL 33405					
		(City/ State and Zip C	Code)	• • •	
deborah@palmbeachharvest.org					
E-mail a	ddress: (to be used	for future annual rep	ort notification	n)	
For further information concerning	this matter, please	call:			
DEBORAH MORGAN		at	561	310-6641	
(Name	of Contact Person)		(Area Code)	(Daytime Telephone Nun	iber)
Enclosed is a check for the following	ng amount made pa	yable to the Florida I	Department of	State:	
□ \$35 Filing Fee ■\$43 Cer		S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certif Certif	O Filing Fee icate of Status ied Copy tional Copy is used)	
Mailing Address Amendment Sect			eet Address lendment Sect	ion	
Amendment Sect			isian of Corn		

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation of

PALM BEACH HARVEST INC

FILED
2022 JAN 24 AM II: 33

(Name of Corporation as currently filed with the Flo	orida Dept. of State)	THE WAY SEE AND
N09000005892	200	#138F=7-3775
(Document	Number of Corporation (i	i known)
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not	For Profit Corporation adopts the followin
A. If amending name, enter the new name of the cor	rporation:	
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "incorpore	The new ited" or the abbreviation "Corp," or "Inc,"
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD)	RFSS)	A-1-1-1
(i i incipal office dadress areas in the second of the sec		11
	 	·
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	<u> </u>	
		
D. If amending the registered agent and/or registered		da, enter the name of the
new registered agent and/or the new registered o	office address:	
Name of New Registered Agent:		
New Registered Office Address:		(Florida street address)
		Florida
	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Regi	stered Agent:	
I hereby accept the appointment as registered agent. I	am familiar with and acc	ept the obligations of the position.
	Signature of New Rey	gistered 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 X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
l) Change Add	<u>P</u>	ELVIN DOWLING	PO BOX 2817 PALM BEACH FL 33480
X Remove			
2) Change Add	P	SAMUEL JEAN	4601 S FLAGLER DR WPB FL 33405
Remove	D	LARRY WAYNE GORSUCH	4601 S FLAGLER DRIVE WPB FL 33405
4) Change Add	<u> </u>		
Remove 5) Change Add			
Remove 6)ChangeAdd			
E. If amending or addin (attach additional shee		onal Articles, enter change(s) here: essary). (Be specific)	

	<u> </u>
	<u> </u>
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
Effective date if applicable: (no more than 90 days after amendment fi	: date)
	cuirmants this data will not by listed as the

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)

(CHECK ONE)

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

Dated	1 19 2022
Dated	
Signature	× XXXXX
	(By the chairman of vice chairman of the board, president or other officer-if director have not been selected, by an incorporator – if in the hands of a receiver, trustee, or
	other court appointed fiduciary by that fiduciary)
	SAM JEAN
	SAM JEAN