

N13000004726

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

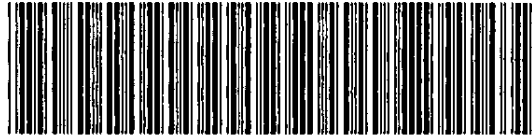
(Business Entity Name)

(Document Number)

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13 OCT 15 PM 3:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

C. LEWIS
OCT 22 2013
EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 2, 2013

GARY D. ALEXANDER / NEW LEAF EARTH INC
4285 SW MARTIN HWY
PALM CITY, FL 34990

SUBJECT: NEW LEAF EARTH, INC.
Ref. Number: N13000004706

We have received your document for NEW LEAF EARTH, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

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.

Carolyn Lewis
Regulatory Specialist II

Letter Number: 013A00023120

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: NEW LEAF EARTH, INC.

DOCUMENT NUMBER: N13000004706

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

GARY D. ALEXANDER

(Name of Contact Person)

NEW LEAF EARTH, INC.

(Firm/ Company)

4285 SW MARTIN HIGHWAY

(Address)

PALM CITY, FL 34990

(City/ State and Zip Code)

Gary@Technology-River.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GARY ALEXANDER

(Name of Contact Person)

at (772) 380-4320

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

APPROVED
AND
FILED
13 OCT 15 PM 3:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NEW LEAF EARTH, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)
N 13000004706

(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:

A. If amending name, enter the new name of the corporation:

N/A

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:

(Principal office address **MUST BE A STREET ADDRESS**)

N/A

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

N/A

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: **N/A**

(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

E., If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

N/A

The date of each amendment(s) adoption: 09/19/2013
date this document was signed.

Effective date if applicable: _____
(no more than 90 days after amendment file date)

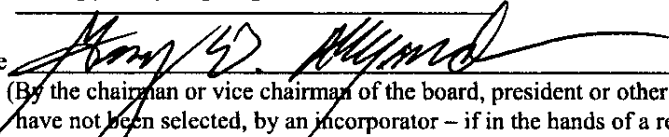
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if other than the
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.
- ☐ 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 10/14/2013

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)

GARY D. ALEXANDER

(Typed or printed name of person signing)

CORPORATE SECRETARY

(Title of person signing)