## Florida Department of State

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN THE BROOKSVILLE SILO PROJECT, INC.

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SEP 1 6 2015

## Articles of Amendment to Articles of Incorporation

οſ THE BROOKSVILLE SILO PROJECT, INC. (Name of Corporation as currently filed with the Florida Dept. of State) N15000007450 (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, N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicables (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: Plorida (Clty) (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

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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	PT V SV	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Titla	<u>Name</u>	<u>Addres</u> \$
I) Change	D	Randy Mazourek	124 South Main Street
× Add			Brooksville, FL 34601
Remove			
2) Change	· · · · · · · · · · · · · · · · · · ·		
Add			
Remove			
3) Change			<del></del>
Add		•	
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			<del></del>
δ) Change	·	·	
Add			
Remove			.,,,,

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

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The date of each amendmen			· · · · · · · · · · · · · · · · · · ·	<u> </u>			if other
date this document was signe	d					•	
Effective date if applicable:		· · · · · · · · · · · · · · · · · · ·					
	` (N	o more than 90	days after ar	nendment fil	e date)		
Note: If the date inserted in document's effective date on				tory filing re	quirements, (	ihla dato wii	l not be listed as
Adoption of Amendment(s)		CHECK ONE)					
The amendment(s) was/was/were sufficient for a		y the members a	nd the numbe	r of votes c	ist for the an	nendment(s)	
There are no members o adopted by the board of	r members entit directors.	led to vote on th	e amendmen	t(s). The an	nendment(s)	was/were	
Dated	9/13	2015		· · · · · · · · · · · · · · · · · · ·			:
. Signature	12	<u> </u>					
have	not been selecte	rice chairman of ed, by an incorpo a fiduciary by th	rator — if in	esident or or the hands of	ther officer-i a receiver, t	f directors rustee, or	
B)	nir M. Hensley						
· .		(Typed or	printed nam	of person s	igning)		
Pr	csident	· · · · · · · · · · · · · · · · · · ·					
_	· · ·		(Title of pe	rson signing	)		