

## N16000003516

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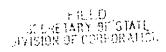
## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	Farming the Future, Inc.
DOCUMENT NUMBER:	N16000003516
The enclosed Articles of Am	sendment and fee are submitted for filing.
Please return all corresponde	ence concerning this matter to the following:
Lowell Collins	
	(Name of Contact Person)
Farming the Future, Inc.	
	(Firm/ Company)
2746 Pecan Road	
	(Address)
Tallahassee, FL 32303	
	(City/ State and Zip Code)
FTFIncorporated@gmail.co	m
E	-mail address: (to be used for future annual report notification)
For further information conc	erning this matter, please call:
Dustin Metz	850 at
	(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the fo	ollowing amount made payable to the Florida Department of State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & □\$43.75 Filing Fee & Certificate of Status  Certificate of Status  (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

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



## Articles of Amendment to Articles of Incorporation of

2016 SEP 19 PM 2: 07

Farming the Future, Inc.				
(Name of Corporation as curren	ntly filed with the Florida Dept. of State)			
N16000003516				
(Document Numb	per of Corporation (if known)			
Pursuant to the provisions of section 617.1006, Florida Statut amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the following			
A. If amending name, enter the new name of the corporat	ion:			
	The new			
name must be distinguisnable and contain the word "corpord "Company" or "Co." may not be used in the name.	ation" or "incorporated" or the abbreviation "Corp." or "Inc."			
B. Enter new principal office address, if applicable:	11167 Tung Grove Road			
(Principal office address <u>MUST BE A STREET ADDRESS</u>	Tallahassee, FL 32317			
C. Enter new mailing address, if applicable:	2746 Pecan Road			
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )				
	Tallahassee, FL 32303			
D. If amending the registered agent and/or registered offi	ce address in Florida, enter the name of the			
new registered agent and/or the new registered office a	adress:			
Name of New Registered Agent:				
	(Florida street address)			
New Registered Office Address:				
	, Florida_			
	(City) (Zip Code)			
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fa				
	ignature 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)

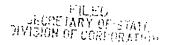
Please note the officer/director title by the first letter of the office title:

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 X Remove X Add	⊻ №	shn Doe like Jones ally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	P	Lowell Collins	2746 Pecan Road
Add			Tallahassee, FL 32303
Remove			
2) X Change	VP	Michele Corichi	2746 Pecan Road
Add			Tallahassee, FL 32303
Remove			
3) X Change	ST	Shawna Senko	11167 Tung Grove Road
Add			Tallahassee, FL 32317
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			· · · · · · · · · · · · · · · · · · ·
δ) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here:  (attach additional sheets, if necessary). (Be specific)								
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2016 SEP 19 Mr ZhePillan the 7/5/2016 The date of each amendment(s) adoption: date this document was signed. 7/5/2016 Effective date if applicable: (no more than 90 days after amendment file date) 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. There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors. 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) Shawna Senko (Typed or printed name of person signing) Secretary / Treasurer (Title of person signing)