N20000004494

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2021 APR 14 PM 12: 50 SECRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations

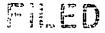
Feeding Plant City Inc
N20000004494 DOCUMENT NUMBER:
OCCUMENT NUMBER.
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Karen Crumley
(Name of Contact Person)
Feeding Plant City Inc
(Firm/ Company)
5603 Five Acre Road
(Address)
Plant City, FL 33565
(City/ State and Zip Code)
KScrumley@yahoo.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Karen Crumley 813 924-3829
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
inclosed is a check for the following amount made payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is Enclosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FI. 32314 Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, Ft. 32303

Articles of Amendment to Articles of Incorporation of



Feeding Plant City Inc 2021 APR 14 PM 12: 50 (Name of Corporation as currently filed with the Florida Dept. of State) SECRETARY OF STATE N20000004494 (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: 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) C. Enter new mailing address, if applicable: (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: ___. Florida ___ (Zip Code) (City) 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

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>	<u>Addres</u> s
1) Change Add			
Remove			
2) Change Add			
Remove 3)		-	
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee)	g additio ts, if nece	nal Articles, enter change(s) here: ssary). (Be specific)	
Amend Article III to read	<u> </u>		
Said organization is organ	ized excl	usively for charitable, regligious, educational and sei	entific purposes, including for such
purposes, the making of d	istributio	ns to organizations that qualify as exempt organizatio	ns described under Section 501(c)(3)
of the Internal Revenue C	ode, or co	prresponding section of any future federal tax code.	
Upon dissolution of the or	ganizatio	n, assets shall be distributed for one or more exempt	purposes within the meaning of Secti

	Pode, or corresponding section of any future federal tax code, or shall be distributed to the local government, for a public purpose.
redefai government, or to a state of	Total government, for a public purpose.
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<u> </u>	
The date of each array at 1997	doption:, if other than th
date this document was signed.	if other than th
Effective date <u>if applicable</u> ;	
meetive date <u>ii applicable.</u>	(no more than 90 days after amendment file date)
Note: If the date inserted in this blo document's effective date on the De	ack does not meet the applicable statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were as was/were sufficient for approve	dopted by the members and the number of votes cast for the amendment(s)

•

	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 04-02-2021				
	Signature Tiren arunday				
	(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)				
	- KAREN CRUMLEY				
	(Typed or printed name of person signing)				
	PRESIDE NT				
	(Title of person signing)				