

3/3/2021

Division of Corporations

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850)617-6380

From:

Account Name : SHUFFIELD LOWMAN  
Account Number : I20030000118  
Phone : (407)581-9800  
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Email Address: REGISTEREDAGENT-WRL@SHUFFIELDLOWMAN.COM

**COR AMND/RESTATE/CORRECT OR O/D RESIGN  
GROWFL, INC.**

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Electronic Filing Menu

Corporate Filing Menu

Help

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**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF INCORPORATION  
OF  
GROWFL, INC.**

Florida Document Number: N21000000826

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:

This amendment is submitted to amend the following:

☒ **Amending the Officers and/or Directors of record:**

Enter the name and title of each officer and director being removed, and the name, title and address of each officer or director being added or changed. 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.

<input checked="" type="checkbox"/> Add <input type="checkbox"/> Change <input type="checkbox"/> Remove	President, Director	Kevin	Carr	
	Title(s)	(First Name)	(Middle)	(Last) (Suffix)
		800 N. Magnolia Ave., Suite 1850		
		(Street Address)	Orlando	FL 32803
		(City)	(State)	(Zip) (Country)

<input checked="" type="checkbox"/> Add <input type="checkbox"/> Change <input type="checkbox"/> Remove	Vice President, Treasurer, Director	Rovena	Pando	
	Title(s)	(First Name)	(Middle)	(Last) (Suffix)
		800 N. Magnolia Ave., Suite 1850		
		(Street Address)	Orlando	FL 32803
		(City)	(State)	(Zip) (Country)

<input checked="" type="checkbox"/> Add <input type="checkbox"/> Change <input type="checkbox"/> Remove	Secretary, Director	Maria	Alfano	
	Title(s)	(First Name)	(Middle)	(Last) (Suffix)
		800 N. Magnolia Ave., Suite 1850		
		(Street Address)	Orlando	FL 32803
		(City)	(State)	(Zip) (Country)

((H21000087483 3)))

The date of adoption for each amendment: January 21, 2021

Effective date if different than the date of filing: \_\_\_\_\_  
(Cannot be prior to date of filing or, if delayed, more than 90 days after amendment file date)


**Adoption of Amendment(s):**

The Amendment(s) was/were adopted by:

☒ the members, and the number of votes cast for the amendment by the members 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: March 3, 2021.

  
\_\_\_\_\_  
(Signature)

William R Lowman, Jr.  
\_\_\_\_\_  
(Typed or printed name of person signing)

Incorporator  
\_\_\_\_\_  
(Title of person signing)