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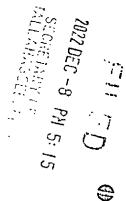
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COVER LETTER

TO: Amendment Section * Division of Corporations		
NAME OF CORPORATION: CU &	Seed	<u>.</u>
DOCUMENT NUMBER: N2100	1000 5599	1
The enclosed Articles of Amendment and fee are su	bmitted for filing.	
Please return all correspondence concerning this ma	tter to the following:	
	Pauline Xi	ng
	(Name of Contact Person) /
	(Firm/ Company)	
90>	SU 9.1h a	ve, Herrondale
	(Address)	
71,3	<u>1009</u>	
	(City/ State and Zip Code)
E-mail address: (to be us	y Lave Se ger for future annual report r	ed (1) gmeil. Cul
For further information concerning this matter, plea	se call:	
(Name of Contact Perso	at <u>1</u> (An	SC) 359 - 32 12 ea Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made	payable to the Florida Depa	rtment of State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status		□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address		Address
Amendment Section Division of Corporations		ment Section

P.O. Box 6327

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

	Articles of Amendment	£ 1.
	to	The state of the s
	Articles of Incorporation of	1022 00
		2020-8
	Love Seco	145 PM 5
Name of Corporation as currently filed with the	Florida Dept. of State)	2022 DEC -8 PM 5: 14
1 6 1 1	MANA CEGO	No.
(Docume	ent Number of Corporation (if know	11)
Pursuant to the provisions of section 617.1006, Flori amendment(s) to its Articles of Incorporation:	ida Statutes, this Florida Not For Pr	rofit Corporation adopts the following
A. If amending name, enter the new name of the	cornoration:	
17 Swelley and 17 Swelley and 18 Swe		
		The new
name must be distinguishable and contain the word	"corporation" or "incorporated" of	r the abbreviation "Corp." or "Inc."
"Company" or "Co." may not be used in the name.		
B. Enter new principal office address, if applicab	ale:	
(Principal office address MUST BE A STREET AL		
	,	
	<u> </u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	POV.	
(Mulling dutiress MAT BE A FOST OFFICE B		- · · · · · · · · · · · · · · · · · · ·
 If amending the registered agent and/or regist new registered agent and/or the new registere 		er the name of the
new registered agent and/or the new registere	d onice address.	
Name of New Registered Agent:		
		•
-		
New Registered Office Address:	(l·Iorida	street address)
Hen Registered Office Address.		
		, Florida
_	(City)	(Zip Code)
New Registered Agent's Signature, if changing Re		
hereby accept the appointment as registered agent.	I am familiar with and accept the	obligations of the position.
	/)	
	A 1	'
	Jauln &	

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If amending the Officers and/or Dir	rectors, enter the title and name of each officer/director being removed and title, name,
and address of each Officer and/or I	Director being added:
244 1 124 1 1 2 2	

(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 John I V Mike J SV Sally S	lones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1)Change	Director	Kendrick Campbell	4910 MN 44th terrace tomarac P 33319
Remove			
2) Change Add		· · · · · · · · · · · · · · · · · · ·	
Remove 3) Remove Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or add		icles, enter change(s) here: (Be specific)	
Purpose)			
-	ove Seco	linc. is organize	d exclusioly
For cho	witable,	religious reducation	cal and Scientific
purposes, in	ncluding ,	For such purposes, the	1 making of
distribution	15 tú a	rganizations that g	inality as evempt

cragizations described under section gollow of internal
kivenue code, or Corresponding section of ong
Future Federal tax code.
1040/6 46666-1 167-36
Shail be distributed for one or more exempt purposes within meaning of Section Sol(cs) of the I.R.C (ode or corresponding Section of any future Federal tax (ode, or shall be distributed to the Federal government, or to a state or local government, for a public purpose.
The date of each amendment(s) adoption:, if other than the date this document was signed.
Effective date if applicable: ///30/2022
(no more than 90 days after amendment file date)

<u>Note:</u> 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.

Adopting 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 $\frac{1}{30}$ 30/2022	
Signature Rul-iK	
(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)	
Pauline King	
(Typed or printed name of person signing)	
Director	
(Fitle of person signing)	