Division of Corporations **Electronic Filing Cover Sheet**

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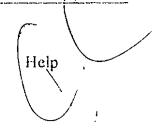
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COR AMND/RESTATE/CORRECT OR O/D RESIGN SEEDFORCE, INC.

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COVER LETTER

TO: Amendment Section Division of Corporations							
NAME OF CORPORATION	SEEDFORCE, INC						
DOCUMENT NUMBER:	123000000669						
The enclosed Articles of Amer	ndment and fee are sub	mitted for filing.					
Please return all corresponden	ce concerning this matt	er to the followin	g:				
		Leslie Artze, Esq					
		(Name of Contac	et Person)				
		Fernandez Legal				-	2023 bcT 20
	•,, •	(Firm/ Com	pany)			-	007
	13	35 W. Central Biv	d. Stc 300				20
		(Address	s)			1/.	PI
		Orlando, FL I	32801			. • · · • • · · • · ·) 12: 46
		(City/ State and 2	Zip Code)				
		avaldez83@gr	nail.com				
E-n	iail address: (to be used	l for future annua	report no	tification	1)		
For further information concer	ning this matter, please	call:					
Leslie Artze, Esq.			407		574 5009		
(N	ame of Contact Person	1)	(Area	Code)	(Daytime Teler	hone Nun	nber)
Enclosed is a check for the following	owing amount made p	ayable to the Flori	da Depart	ment of	State:		
☐ \$35 Filing Fee ☐	3543.75 Filing Fee & Certificate of Status	□\$43.75 Filing I Certified Copy (Additional co- enclosed)		Certifi Certifi	Filing Fee icate of Status ed Copy ional Copy is sed)		
Mailing Address Amendment Section			Street Ac Amendm	ent Secti			
Division of C		Division of	or Corpe	rations			

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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Fax

Articles of Amendment to Articles of Incorporation

SEEDFORCE, INC.	Th			
Name of Corporation as currently filed with the Florid;	a Dept, of State)			
N23000000669				
(Document Nun	nber of Corporation	ı (if known)		
Pursuant to the provisions of section 617,1006, Florida Statimendment(s) to its Articles of Incorporation:	utes, this <i>Florida N</i>	ot For Profit Corporation a	dopts the fo	ollowing
. If amending name, enter the new name of the corpor	ation;			
				ri 😭
ame must be distinguishable and contain the word "corpor Company" or "Co." may not be used in the name.	ration" or "incorp	orated" or the abbreviation	"Corp." or	
5 P				2 ;
 Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRES 		,	<u> </u>	
The the office and the state of	<u> </u>		inc	P.
				PH 12: 116
				=
Enter new mailing address, if applicable:				6
(Muiling address MAY BE A POST OFFICE BOX)				
				
). If amending the registered agent and/or registered of	Sice address in Fla	wide enter the name of the		
new registered agent and/or the new registered office		A total, circle the hance of the	-	
Name of New Registered Agent:				
New Registered Office Address:		(Florida street address)		
Sew Registered Office Address.				
		, Florida		
	(City)	(Zip)	(Pode)	
ew Registered Agent's Signature, if changing Registere	d Agent:			
hereby accept the appointment as registered agent. Lam)		ccept the obligations of the p	osition.	
•				
	Signature of New F	legistered Agent, if changing		

p.4

Fax

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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 Doc 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 De Mike Jo Sally Sr	<u>nes</u>			
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s		
1) Change Add	D	_	Alma Aguilar	1404 Sidney Rd. Plant City, Florida, 335		******
× Remove					CT 20	و فلا ادغمست منتلاد
2) Change Add	-	_				ا ا ا
Remove 3) Remove Add Remove					\sim	
4) Change Add		_				
Remove						
5) Change Add						
Remove						
6) Change Add		•••				
Remove					·	
E. If amending or addir (attach additional shee			cles, enter change(s) here: (Be specific)			
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	doption:		_, if other than the
date this document was signed.	10/19/2023		
Effective date if applicable:	tno more than 90 days after amendment file date	e)	
Note: If the date inserted in this blo document's effective date on the De	ock does not meet the applicable statutory filing require partment of State's records.	ements, this date will not	he listed as the
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were ac was/were sufficient for approve	dopted by the members and the number of votes east fo	or the amendment(s)	

Fax

Dated

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)

Jessica Cruz

(Typed or printed name of person signing)

Director

(Title of person signing)

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