## N24000000150

-
(Requestor's Name)
(A d d = = = )
(Address)
•
(Address)
, ,
•
(City/State/Zip/Phone #)
· •
PICK-UP WAIT MAIL
l
(Business Entity Name)
- · ·
(Document Number)
(Dodding Norman)
J
Certified Copies Certificates of Status
! !
ı
<u> </u>
Special Instructions to Filing Officer
••
··
Off == 11== O=1::
Office Use Only
l
• · · · · · · · · · · · · · · · · · · ·
!
k
Process and the second



600433146936

07/24/24--01003--001 \*\*35.00

2024 JUL 24 PH 3: 42 PECETYED
SECRETARY OF STATE 2024 JUL 23 PH 3: 25
TALLAHASSEE, FL

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATI	l Plant Food, Inc.					_
DOCUMENT NUMBER:	N24000000150					
The enclosed Articles of Art	mendment and fee are sub	omitted for filing.				
Please return all correspond	lence concerning this mat	ter to the following:				
TAMELA STULTS-WAG	NER, Esq.					
		(Name of Contact P	erson)			_
WAGNER LAW FLORID	A					
		(Firm∕ Compan	y)			
1501 MEEKS RD						
		(Address)		<del></del>		_
TALLAHASSEE, FLORIE	DA 32317					
·		(City/ State and Zip	Code)			_
WAGNERLAWFL@GMA	AL COM	( + <b>, ,</b> -	,			
9	E-mail address: (to be use	d for future annual re	port notificatio	n)	<del></del>	
For further information con	cerning this matter, pleas	e call:				
TAMELA STULTS-WAG	NER, ESQ.	at	954	781-7081	SECR TAL	2024 J
	(Name of Contact Person	n)	(Area Code)	(Daytime Telephone	Number	<u>_</u>
Enclosed is a check for the	following amount made p	payable to the Florida	Department of	State:	RY (	Ě
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy enclosed)	& 🗆 \$52.5 Certif is Certif (Addi Enclo	781-7081  (Daytime Telephone State:  0 Filing Fee ficate of Status fied Copy tional Copy is osed)	OF STATE SEE, FL	34 3 42
Mailing	1 ddwaec	ç.	waat telebaar			

Mailing Address

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

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

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

(Document Number of Corporation: ursuant to the provisions of section 617.1006, Florida Statutes, this Florida mendment(s) to its Articles of Incorporation:  If amending name, enter the new name of the corporation: MICROGREENS ARE MEDICINE INTERNATIONAL, INC.  ame must be distinguishable and contain the word "corporation" or "incorporation" or "incorporaty" or "Co." may not be used in the name.	
ursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida</i> mendment(s) to its Articles of Incorporation:  If amending name, enter the new name of the corporation:  MICROGREENS ARE MEDICINE INTERNATIONAL, INC.  ame must be distinguishable and contain the word "corporation" or "inco	ida Not For Profit Corporation adopts the follow
mendment(s) to its Articles of Incorporation:  . If amending name, enter the new name of the corporation:  AICROGREENS ARE MEDICINE INTERNATIONAL, INC.  Tame must be distinguishable and contain the word "corporation" or "income must be distinguishable and contain the word "corporation" or "income must be distinguishable and contain the word "corporation" or "income must be distinguishable and contain the word "corporation" or "income must be distinguishable and contain the word "corporation" or "income must be distinguishable and contain the word "corporation" or "income must be distinguishable and contain the word "corporation" or "income must be distinguishable and contain the word "corporation" or "income must be distinguishable and contain the word "corporation" or "income must be distinguishable and contain the word "corporation" or "income must be distinguishable and contain the word "corporation" or "income must be distinguishable and contain the word "corporation" or "income must be distinguishable and contain the word "corporation" or "income must be distinguishable and contain the word "corporation" or "income must be distinguishable and contain the word "corporation" or "income must be distinguishable and contain the word "corporation" or "income must be distinguishable and contain the word "corporation" or "income must be distinguishable and contain the word "corporation" or "income must be distinguishable and contain the word "corporation" or "income must be distinguishable and contain the word "corporation" or "income must be distinguishable and contain the word "corporation" or "income must be distinguishable and contain the word "corporation" or "income must be distinguishable and contain the word "corporation" or "income must be distinguishable and contain the word "corporation" or "income must be distinguishable and contain the word "corporation" or "income must be distinguishable and contain the word "corporation" or "income must be distinguishable and contain the word "corporation" or "incom	
IICROGREENS ARE MEDICINE INTERNATIONAL, INC.  ume must be distinguishable and contain the word "corporation" or "inc	Thu
ame must he distinguishable and contain the word "corporation" or "inc	Th
company or co. may not be used in the name.	
. Enter new principal office address, if applicable:  Principal office address MUST BE A STREET ADDRESS )	
. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
<ul> <li>If amending the registered agent and/or registered office address in new registered agent and/or the new registered office address:</li> </ul>	n Florida, enter the name of the
	(2)
Name of New Registered Agent:	77.
	(Florida street address)
New Registered Office Address:	A A R
	, Florida XX
	(Tin Code) MT
(City)	(Zip Code)
(City) ew Registered Agent's Signature, if changing Registered Agent:	

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	PT John I V Mike SV Sally		
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) X Change Add	S, D	Daniel M. Wagner	1501 Meeks Rd. Tallahassee, Florida 32317
Remove			
2) Change Add			
Remove 3 ) Change Add Remove			
4) Change Add	<del></del>		
Remove			70
5) Change Add	<del></del>		SECRETARY SECRETARY
Remove			PH 3 43 OF STAT RSSEE, FL
6) Change Add			TP 5
Remove			
E. If amending or ad (attach additional s.		rticles, enter change(s) here: (Be specific)	
n/a			
****			

n/a		
		<u> </u>
		**************************************
		<del></del>
		<del></del>
·		<del></del>
		<del></del>
<del></del>		<del></del>
<del>-</del>		
		· 20
•		10 -
		- PR = :
	•	SECRETAR'S TALLAH
		SECRETARY OF S
		SEF S
		STATT EE, FL
		一点
<b>3</b>		10 A A
date this document was signed.	ption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Department.	c does not meet the applicable statutory filing requirements, this date wintment of State's records.	ill not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ado was/were sufficient for approval.	pted by the members and the number of votes cast for the amendment(s	;)

adopt	ed by the board of directors.
	7/23/2024 Dated
	Signature Sunda State Way
	(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)
	Tamela J. Stults-Wagner
	(Typed or printed name of person signing)
	President

(Title of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were

FILED 24 PH 3 43