## PD2000080902

(Re	questor's Name)	
bA)	dress)	
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(Cit	y/State/Zip/Phone #)	)
PICK-UP	WAIT	MAIL
(Bu:	siness Entity Name)	
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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

•

NAME OF CORPO	RATION: Redfield Farms, In	ec.	
DOCUMENT NUMI	P02000080902		<u></u>
The enclosed Articles	of Amendment and fee are su	abmitted for filing.	
Please return all corre	spondence concerning this ma	atter to the following:	
	John D. Burger		
		Name of Contact Person	
	Berg Faircloth		
	· · · · · · · · · · · · · · · · · · ·	Firm/ Company	
	44135 Woodridge Pkwy, Sui	te 200	
		Address	
	Leesburg, VA 20176		
		City/ State and Zip Code	
jburg	er@b-f-c.com		
	E-mail address: (to be u	sed for future annual report r	notification)
For further informatio	n concerning this matter, plea	se call:	
John D. Burger		at ( <sup>703</sup>	821-1040
Name	of Contact Person	Area Cod	e & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Depar	tment of State:
□ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fec Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Division Clifton	Address ment Section n of Corporations Building secutive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

to

Redfield Farms, Inc.				
(Name of Corporation as currently	filed with the Florida Dept, of State	)		_
P02000080902				
(Document Number of	Corporation (if known)			
Pursuant to the provisions of section 607.1006, Florida Statutes, this F its Articles of Incorporation:	lorida Profit Corporation adopts the f	ollowin	g ameno	iment(s)
A. If amending name, enter the new name of the corporation:				
			The i	пеж
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "F	o". A professional corporation name	r the ai	- bbreviai contain	tion the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )				_
	<del></del>			_
				-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		وم 🚅	20	
(muning undress MAT BE A FOST OFFICE BOX)	·	#1 77	- B	
			_==-	!
				_[_
D. If amending the registered agent and/or registered office addre	ss in Florida, enter the name of the	•		
new registered agent and/or the new registered office address:			<del>:</del> -	( ا
Name of New Registered Agent			_ <b>क</b> ਹ	
			_	
(Florida stree	et address)			
New Registered Office Address:	, Florida_		<del></del>	
	City)	(Zip C	Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar we	th and accept the obligations of the po	sition.		
Signature of New Re	gistered 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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	S/T	Bastian Schroeder	237 Old Tumpike Road
Add			Califon, NJ 07830
X Remove			
2) Change		_	
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			<del></del>
6) Change			
Add			
Remove			

	or adding addition on al sheets, if neces	ssary). (Be s	pecific)			
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<u>f an amend</u>	ment provides for	an exchange, i	<u>reclassification</u>	or cancellation	of issued shares,	
provisions	for implementing t	he amendmen	<u>t if not contain</u>	ed in the amend	ment itself:	
(if not a	pplicable, indicate	N/A)				
					-	<del>-</del> -
					·	
						<del></del>
				·		

The date of each amendment(s) adoption:	_, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
01/02/2018	
Dated	
Signature	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	_
Emil Spadone, III	
(Typed or printed name of person signing)	
President	
(Title of person signing)	<del></del>