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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: SOUTH F	FLORIDA TREE FARMER	RS CO-OP, INC.
DOCUMENT NUMBER: P0400002878	2	
The enclosed Articles of Amendment and fee	are submitted for filing.	
Please return all correspondence concerning t	his matter to the following:	
ELLEN OSMAN		
(Name	e of Contact Person)	
SOUTH FLORIDA TRI	EE FARMERS CO-OP,	INC.
0	Firm/ Company)	
7405 SW 134 STREET		
	(Address)	
MIAMI, FLORIDA 33156		
(City/	State and Zip Code)	•
For further information concerning this matte	r, please call:	
ELLEN OSMAN	at (305) 238-23	
(Name of Contact Person)	(Area Code & Daytime	e Telephone Number)
Enclosed is a check for the following amount:	:	
\$35 Filing Fee \$\sum \frac{1}{2}\\$43.75 Filing Fee \$\text{Certificate of Status}\$	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301	ircle

Articles of Amendment to Articles of Incorporation of

SOUTH FLORIDA	TREE FARMERS	5 CO-OP, INC.	
(Name	s of corporation as our	ently filed with the Florid	Dept. of State)

P0400028782 (Document number of corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:
NEW CORPORATE NAME (if changing):
N/A
(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC) ARTICLE: V
Add: Daniel Osman as Vice President and Secretary/Treasurer
13740 SW 74 CT. Minn, FL. 33158
——————————————————————————————————————
(Attach additional pages if necessary)
If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
N/A
(positistued)

FILED

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SECRETARY OF STATE

The date of each amendment(s) adoption: 02/02/2006	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were approved by the shareholders. The number of votes can the amendment(s) by the shareholders was/were sufficient for approval.	st for
The amendment(s) was/were approved by the shareholders through voting groups. I following statement must be separately provided for each voting group entitled to vot separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approve	ıl by
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder and shareholder action was not required.	action
The amendment(s) was/were adopted by the incorporators without shareholder action shareholder action was not required.	n and
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)	
Ellen Osman	
(Typed or printed name of person signing)	
President	
(Title of person signing)	

FILING FEE: \$35