(Re	equestor's Name)			
(Ad	ldress)			
(Ad	Idress)			
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
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R. WHITE

COVER LETTER

Division of Corporations NAME OF CORPORATION: Aerial Crop Protection, Inc. DOCUMENT NUMBER: P06000060268 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following:

Deena Perryman f/k/a Deena Stamm Name of Contact Person Aerial Crop Protection, Inc. Firm/ Company 50 Airport Road Address Belle Glade, Florida 33430 City/ State and Zip Code

midwaybg@bellsouth.net E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TO: Amendment Section

Deena Perryman Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

> **Mailing Address** Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Street Address

Articles of Amendment to Articles of Incorporation

	FILE	•
14	JUL 31 6	3: []

Aerial Crop Protection, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P06000060268 (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: A. If amending name, enter the new name of the corporation: N/A name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: , Florida (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered 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.

Example: X Change	<u>PT</u> <u>J</u>	ohn Doe	
X Remove	<u>v</u> <u>n</u>	1ike Jones	
X Add	<u>sv</u> <u>s</u>	ally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	PD	J.D. Lee, III	50 Airport Road
Add			Belle Glade, Florida 33430
Remove			
2) Change	<u>VD</u>	Barton T. Perryman	50 Airport Road
✓ Add			Belle Glade, Florida 33430
3) Change	STD	Deena Perryman	50 Airport Road
Add			Belle Glade, Florida 33430
Remove			
4) Change			
Add			
Remove			
5) Change	···-		
Add			
Remove			
6) Change	· · · · · ·		
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)					
N/A	ten additional sheets, if necessary). (be specific)				
13/7					
·					
					
<u></u>					
F Ifar	n amendment provides for an exchange, reclassification, or cancellation of issued shares,				
pro	ovisions for implementing the amendment if not contained in the amendment itself:				
NI/A	(if not applicable, indicate N/A)				
N/A					
_					

The date of each amendment(s) adoption: June 25, 2014		, if other than the
date this document was signed.		
Effective date if applicable:		
_	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were as by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
The amendment(s) was/were amust be separately provided for	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
	st for the amendment(s) was/were sufficient for approval	
by	."	
	(voting group)	
The amendment(s) was/were action was not required.	dopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ac action was not required.	dopted by the incorporators without shareholder action and shareholder	
Dated_July / Signature	4,2014 Olna Los Porruman	
(By a	director, president or other officer - if directors or officers have not been	
	ed, by an incorporator – if in the hands of a receiver, trustee, or other court	
appoi	nted fiduciary by that fiduciary)	
	Deena Perryman	
	(Typed or printed name of person signing)	
	Secretary/Treasurer	
	(Title of person signing)	