P11000098972

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF COPPOR	RATION: J HAMILTO	ON FARMS INC	
DOCUMENT NUME	P1100009897	<u>'2</u>	
	of Amendment and fee are su		
Please return all corres	pondence concerning this ma	atter to the following:	
	RITA FOWLER		
•	FOWLER-CORL	Name of Contact Person EY & ASSOCIA	
	5450 BRUCE B [Firm/ Company	±323
	WESLEY CHAPE	·	
FO	WLERCORLEY@ E-mail address: (to be u	City/ State and Zip Cod MSN.COM sed for future annual report	
For further information	concerning this matter, please	se call:	
RITA FOWLE	ER .	_{at (} 813	748-9654 de & Daytime Telephone Number
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
□ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



J HAMILTON FARMS INC

Name of Communition on assumential filed with the	Clauda Dana af Cassa)
(Name of Corporation as currently filed with the P11000098972	rionaa Dept. oi State)
(Document Number of Corporation ((if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
J D HAMILTON INC	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered office add	ress in Florida, enter the name of the
new registered agent and/or the new registered office address	
Name of New Registered Agent N/A	····
(Florida st	reet 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	
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>Jo</u>	hn Doe		
-				,
X Remove	<u>V</u> <u>M</u>	ike Jones		
X Add	<u>SV</u> <u>S</u> a	ally Smith		
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s	
1) Change Add Remove				
2) Change Add Remove			 	
3) Change Add Remove				
4) Change Add Remove	**************************************			PARTIE 11
5) Change Add Remove				
6) Change Add Remove				

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	ange, reclassifica	ange, reclassification, or candidment if not contained in the	ange, reclassification, or cancellation of dment if not contained in the amendme	ange, reclassification, or cancellation of issued shadment if not contained in the amendment itself:	ange, reclassification, or cancellation of issued shares, idment if not contained in the amendment itself:

The date of each amendment(s) a	doption: 2/8/12
Effective date <u>if applicable</u> :	8/12
Enective date <u>it applicable</u> .	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add by the shareholders was/were st	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
	proved by the shareholders through voting groups. The following statement 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)
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder
Dated 2/9/12	
Signature (By a constant selected	hirector, 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 med fiduciary by that fiduciary)
	JONATHAN D HAMILTON
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)