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NOV 0 8 2018 S. YOUNG 18 NOV -2 AH 8: 16 SECRETANN OF STATE ALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section Division of Corporations					
NAME OF CORPORATION: M.K. Harvesting, Inc.					
DOCUMENT NUMBER: 1 F O O O O O O O O O O O O O O O O O O					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Paula Lingenfelder					
M.K. Harvesting, Inc.					
1249 US Hwy 27 S					
Sebring FL 33870 City/State and Zip Code					
· · · · · · · · · · · · · · · · · · ·					
JHHINC@ Centurylink, Net E-mail address: (to be used for future annual report positication)					
For further information concerning this matter, please call:					
Paula Lingenfelder at 863 386-5006 Name of Control Person Area Code & Daytime Telephone Number					
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:					
S35 Filing Fee					
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, Fl. 323142661 Executive Center CircleTallahassee, FL 32301					

Articles of Amendment

to
Articles of Incorporation
of

M.K.	Harv	estin	g. Inc.
Corporation as c	urrently filed	with the Flor	ida Dept. of State

(Name of Corporation as currently	filled with the Fiorida Dept. of State	
P14 01	00008911	
(Document Number of	Corporation (if known)	_
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)) to
A. If amending name, enter the new name of the corporation:	N A	
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 "I	i," "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)	-NA	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BON)	NA	18 NO
D. If amending the registered agent and/or registered office addresses new registered agent and/or the new registered office address:		W-2
Name of New Registered Agent	NH	是 2
(Florida stre	vet address)	
New Registered Office Address:	, Florida (City)	DE 6
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w		
Signature of New Ro	egistered 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.

E vampl e: <u>X</u> Change	PT	John I	<u>Joe</u>	
X Remove	<u>V</u>	Mike	Jones	
X Add	<u>sv</u>	Sally:	Smith	
Type of Action (Check One)	Title		Name	Address
I) Change	\vee		Kimberly W. Hill	304 Raven Ave Sebring FL 33872
X Add			/	Sebring FL 33872
Remove				
2) Change		_		
Add				
Remove				
3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

ch additional sheets, if necessar	No. (See also due)	
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		<u>-</u>
amendment provides for an e	exchange, reclassification, or cancellation of issued shares,	
visions for implementing the a	amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A	t)	
 _		
	- -	-
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The date of each amendment(s) adoption	November 1, 2018	if other than the
late this document was signed.		_, ,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Effective date <u>if applicable</u> :	November 1, 2018 November 1, 2018 (no more than 90 days after amendment file date)	
	The more than to adjust amended for the control	
Note: If the date inserted in this block d locument's effective date on the Department.	loes not meet the applicable statutory filing requirements, this date will tent of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted by the shareholders was/were sufficien	by the shareholders. The number of votes east for the amendment(s) it for approval.	
	by the shareholders through voting groups. The following statement cotting group entitled to vote separately on the amendment(s):	
"The number of votes east for the	amendment(s) was/were sufficient for approval	
by		
	(voting group)	
☐ The amendment(s) was/were adopted b action was not required.	y the board of directors without shareholder action and shareholder	
	by the incorporators without shareholder action and shareholder	
10	31/2018	
Mila	(1) (1/2)	
Signature	president of other officer – it directors or officers have not been	_
selected, by a	n incorporator – if in the hands of a receiver, trustee, or other court uciary by that fiduciary)	
74	M. 1 . 1 . 1111	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	
	/	