P14000011625

| (Re | equestor's Name) | | | |
|---|--------------------|-----------|--|--|
| (Ac | ldress) | | | |
| (Ac | ldress) | | | |
| (Ci | ty/State/Zip/Phone | · #) | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Bu | isiness Entity Nan | 1е) | | |
| (Document Number) | | | | |
| Certified Copies | _ Certificates | of Status | | |
| Special Instructions to Filing Officer: | | | | |
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COVER LETTER

TO: Amendment Section Division of Corporations

| Grass Roots Marijuana Florida, Inc. | | | | | |
|---|--|--|--|--|--|
| DOCUMENT NUMBER: | | | | | |
| The enclosed Articles | of Amendment and fee are sub | omitted for filing. | | | |
| Please return all correspondence concerning this matter to the following: | | | | | |
| | Kirsten Yeager | | | | |
| | Name of Contact Person Grass Roots Ventures, Inc. | | | | |
| Firm/ Company 9655 South Dixie Hwy. STE 200 | | | | | |
| | Miami, FL 33156 | Address | | | |
| | | City/ State and Zip Code | | | |
| kyea | ager@grmfl.com | | | | |
| | E-mail address: (to be us | ed for future annual report | notification) | | |
| For further information concerning this matter, please call: | | | | | |
| Kirsten Yeager | | 305 at (| 215-4691 | | |
| Name | of Contact Person | Area Co | de & 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 & 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) | | |
| Am Div P.O | iling Address endment Section ision of Corporations . Box 6327 | Amend Divisio Clifton | Address ment Section on of Corporations Building yecutive Center Circle | | |

Tallahassee, FL 32301

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Articles of Amendment to Articles of Incorporation

| Grass Roots Marijuana Florida, Inc. | |
|--|---------------|
| (Name of Corporation as currently filed with the Florida Dept. of State) P14000011625 | |
| (Document Number of Corporation (if known) | |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following a its Articles of Incorporation: | mendment(s) t |
| A. If amending name, enter the new name of the corporation: | |
| | he new |
| name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abb. "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must coword "chartered," "professional association," or the abbreviation "P.A." | |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) | |
| | |
| | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | |
| | P. SER |
| | 7 2 |
| D. If amending the registered agent and/or registered office address in Florida, enter the name of the | 72 |
| new registered agent and/or the new registered office address: | 120 |
| Kirsten Yeager Name of New Registered Agent | |
| 9655 South Dixie Hwy. STE 200 | |
| (Florida street address) | |
| Miami 33156 New Registered Office Address:, Florida, | |
| (Ciry) (Zip Code) | |
| | |
| New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I amfamiliar with and accept the obligations of the position. | |
| Thereby accept the appointment as registered agent. I anyjuminal 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.

| X Change | <u>PT</u> | John Doe | |
|----------------------------|-----------|-------------------|-----------------------|
| X Remove | <u>y</u> | Mike Jones | |
| X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | Title | <u>Name</u> | Address |
| 1) Change | Р | Brian Koslow | 9655 South Dixie Hwy. |
| Add | | | STE 200 |
| Remove | | | Miami, FL 33156 |
| 2) Change | Р | Jeffrey E. Feiler | 9655 South Dixie Hwy. |
| Add | | | STE 200 |
| Remove | | | Miami, FL 33156 |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | _ | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |
| I L'INCHIONE | | | |

| E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) |
|---|
| Article IV |
| The number of shares the corporation is authorized to issue is: |
| 100,000 |
| |
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| F. If an amendment provides for an 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) |
| |
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| |

| The date of each amendment(s) adoption: date this document was signed. | | , if other than the |
|--|---|---------------------|
| J | | |
| Effective date <u>if 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 su | opted by the shareholders. The number of votes cast for the amendment(s) officient 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) | |
| | (voting group) | |
| The amendment(s) was/were addaction was not required. | opted by the board of directors without shareholder action and shareholder | |
| The amendment(s) was/were add action was not required. | opted by the incorporators without shareholder action and shareholder | |
| Dated | 13/19 | |
| selecte | lirector, 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 ited fiduciary by that fiduciary) | <u></u> |
| аррош | | |
| | (Typed or printed name of person signing) | |
| | (Typed or printed name of person signing) | |
| | President | |
| | (Title of person signing) | |