# P14000024629

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#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: 3BEEZ HONEY FARM, INC.					
NAME OF CORPORATION: 3BEEZ HONEY FARM, INC.  DOCUMENT NUMBER: P14000024629					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
STACIE M. CARTER  Name of Contact Person					
3BEEZ HONEY FARM Firm/Company					
605 S. Dillingham AVE.  Address					
Kissimmee, FL 34741  City/ State and Zip Code					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
STACIE M. CARTER at (407) 619-1916  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  Certificate of Status  Certified Copy (Additional copy is enclosed)  □ \$43.75 Filing Fee & Certified Copy (Additional Copy is enclosed)  □ \$52.50 Filing Fee Certified Copy (Additional Copy is enclosed)					
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building					

2661 Executive Center Circle

Tallahassee, FL 32301

FILED SECRETARY OF STATE DIVISION OF CORPORATION:

#### Articles of Amendment to Articles of Incorporation of

2016 AUG 25 PM 3: 29

3BEEZ HONEY FARM IN	nc
(Name of Corporation as curre	ently filed with the Florida Dept. of State)
P14000024629	
(Document Number	er of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, the its Articles of Incorporation:	his Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
N/A	The new
name must be distinguishable and contain the word "corpora" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," oword "chartered," "professional association," or the abbreviation	r "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	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 a new registered agent and/or the new registered office addr	
Name of New Registered Agent	<u>A</u>
(Florida	a street address)
New Registered Office Address:	(City) , Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia	ent:
N/A Signature of Ne	w Registered Agent, if changing

### P14000024629

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 <math>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	PT Jo	hn Doe	,
X Remove	<u>v</u> <u>m</u>	ike Jones	
X Add	<u>SV</u> <u>Sa</u>	ally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	<u> 4P</u>	STACIE M. CARTER	3036 LEE SHORE LOOF
Add			ORLANDO, FL
X Remove			32820
2) Change	<u>vp</u>	Kristina L. TURNER	4850 HIDDEN LANE
_X_ Add		•	SAINT CLOUD, FL
Remove			34771
3 ) Change	<del></del>	·	
Add			
Remove			
4) Change	<del></del>		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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E. If amending or adding additional Artic (Attach additional sheets, if necessary).	
NIA	
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·	
	inge, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
SHARES (7,500)	OWNED BY STACIE CARTER
	GO IN THEIR ENTINGTY BY
	ER ON 8/22/2016. THIS
	IS TO REMOVE MYSEIF (STACIE
	HAIF OWNER AND APD THE
IVEW OWNER, R	RISTINA TURNER, IN MY PLACE.
1114 1,500 SHA	RES ARE NOW +HE PROPERTY OF KRISTINA TURNER.
(OWNERSHIP)	OF KRISTINA TURNER.

The date of each amendment(s) adop	tion:	, if other than the
date this document was signed.		2016 AUG 25 PM 3: 29
Effective date if applicable:	8/22/2016 (no more than 90 days after an	
	(no more than 90 days after an	nendment file date)
Note: If the date inserted in this bloc document's effective date on the Depar		filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopte by the shareholders was/were suffic	ed by the shareholders. The number of volcient for approval.	tes cast for the amendment(s)
	ved by the shareholders through voting groch voting group entitled to vote separately	
"The number of votes cast for	the amendment(s) was/were sufficient for	approval
by	(voting group)	
•	(voting group)	
☐ The amendment(s) was/were adopted action was not required.	ed by the board of directors without shareh	nolder action and shareholder
☐ The amendment(s) was/were adopte action was not required.	ed by the incorporators without shareholde	er action and shareholder
	ctor, president or other officer if director or an incorporator - if in the hands of a re-	
appointed	fiduciary by that fiduciary)	
	STACIE CARTER	
	(Typed or printed name of persor	n signing)
_	ILE PRESIDENT	
	(Title of person signi	ng)