# P14000073890

(Re	questor's Name)				
(Address)					
(Ad	dress)				
(Cit	y/State/Zip/Phon	e #)			
PICK-UP	☐ WAIT	MAIL			
(Bu	siness Entity Na	me)			
(Document Number)					
Certified Copies	_ Certificate	s of Status			
Special Instructions to Filing Officer:					

Office Use Only



400269889114

02/26/15--01025--007 \*\*43.75

SECRETARY OF STATE ON VISION OF REARPORATIONS
2015 FEB 26 PH 4: 43

Amend/Name
(10 3/2/15

### **COVER LETTER**

Division of Corporations KleanTerpene, Inc. NAME OF CORPORATION: P14000073890 **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Dunstan K. Hutchinson Name of Contact Person Klean Terpenes, Inc. Firm/ Company 1200 Goodlette Road N, #10184 Address Naples, FL 34101 City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Dunstan K. Hutchinson 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 Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

## **Mailing Address**

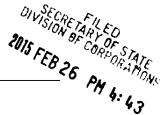
TO: Amendment Section'

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

# **Street Address**

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

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



Klean Terpene, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P14000073890 (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: Klean Terpenes, Inc. 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." B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) C. Enter new mailing address, if applicable: (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: (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>	John Do	<u>e</u>		
X Remove	<u>V</u>	Mike Jo	<u>nes</u>		
X Add	<u>sv</u>	Sally Sn	n <u>ith</u>		
Type of Action (Check One)	<u>Title</u>		<u>Name</u>		Address
1) Change	VP		Todd Fitts		636 Cypress Way E
Add				<del> </del>	Naples, FL 34110
Remove					
2) Change		_			
Add					
Remove					
3) Change					
Add					
Remove					
4) Change		_			
Add					
Remove					
5) Change					•
Add					
Remove					
6) Change					
Add		<del></del>		<del></del>	
Remove					

	· · · · · · · · · · · · · · · · · · ·	
-		-
·	TT 100 P. M	
**	<del></del>	
an amendment provides for an exch	change, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	endiene i invi contained it the amendment itsen.	
<del></del>		

The date of each amendment(s) adoption:	, 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 adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
2/10/15	
DatedSignature	
(By a director, president or other officer – if directors or officers have not been	
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Dunstan K. Hutchinson	
(Typed or printed name of person signing)	
President	
(Title of person signing)	