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COVER LETTER

Division of Corporations NAME OF CORPORATION: BLUE MOON HEMP, INC DOCUMENT NUMBER: P16000010239 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Roy Oppenheim Name of Contact Person Oppenheim Law Firm/ Company 2500 Weston Road, Suite 404 Address Weston, FL 33326 City/ State and Zip Code roy@oplaw.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (954) 384-6114

Area Code & Daytime Telephone Number Paola Canola Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & **\$35** Filing Fee □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (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

FILED

BLUE MOON HEMP, INC

2018 DEC -3 AM 10: 21

(<u>Name o</u>	of Corporation as currently	filed with the Florida Dept. of State	 FISTATE
P16000010239		TALLAHASSE	E.FL
	(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this <i>Fl</i>	orida Profit Corporation adopts the following an	nendment(s) to
A. If amending name, enter the new na	me of the corporation:		
BMH VENTURES, INC.		Th	e new
	ation "Corp," "Inc," or "Co	" "company," or "incorporated" or the abbreo". A professional corporation name must com A."	
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:		N/A	
(Mailing address <u>MAY BE A POST</u>)	<u>OFFICE BOX</u>)		
1) If amounting the anniational agent and	d/an registered office address	in Planida and and harmon of the	
If amending the registered agent an new registered agent and/or the new		is in riorida, enter the name of the	
Name of New Registered Agent	Weston Title & Escrow, Inc		
<u> </u>	2500 Weston Road, Suite 40).4	
	(Florida stree	1 address)	
	Weston	33331	
New Registered Office Address:		, Florida	
New Registered Agent's Signature, if c			
I hereby accept the appointment as regist	ered agent. Tamfamiliar wi	th and accept the obligations of the position.	
V /		Vice President	
	Signature of New Res	gistered 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:

 $P = President; V \cap Vice President; T = Treasurer; S = Secretary; D = Director, TR = Trustee; C \cap Chairman or Clerk; CEO + Chief Executive Officer; CFO + Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$

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	PT John	John Doe		
X Remove	<u>V</u> <u>Mik</u>	e Jones		
X Add	<u>SV</u> <u>Sall</u>	y Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change	CEO	Cowart, Christopher D	3100 NW 2nd Ave	
Add			Suite 117	
X Remove			Boca Raton, FL 33431	
2) X Change	CEO/ P	Castellano, John	3100 NW 2nd Ave	
Add			Suite 117	
Remove			Boca Raton, FL 33431	
3) Change	D	Castellano, John	3100 NW 2nd Ave	
X Add			Suite 117	
Remove			3100 NW 2nd Ave	
4) Change				
Add			. 	
Remove				
5) Change				
Add			-	
Remove				
6) Change				
Add				
Remove				

F. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
N/A
170
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)
N/A

	October 1st, 2018	
The date of each amendment(s) a date this document was signed.	doption:	, if other than the
	ober 1st, 2018	
Effective date if applicable:	(no more than 90 days after	amendment file date)
Note: If the date inserted in this document's effective date on the D		ry filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of ufficient for approval.	votes cast for the amendment(s)
	proved by the shareholders through voting proved by the shareholders through voting group entitled to vote separate	
"The number of votes cas	for the amendment(s) was/were sufficient	for approval
by	(voting group)	"
	(voting group)	
The amendment(s) was/were adaction was not required.	opted by the board of directors without share	reholder action and shareholder
☐ The amendment(s) was/were adaction was not required.	opted by the incorporators without shareho	lder action and shareholder
Novembe Dated	9,2018	
Signature ·	John william	 -
(By a select	firector, president or other officer – if directed, by an incorporator – if in the hands of a steel fiduciary by that fiduciary)	
	John Castellano	
	(Typed or printed name of pers	son signing)
	CEO / President	
	(Title of person sig	ening)