

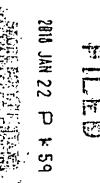
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## COVER LETTER

Division of Corporations McFarlin Feed + Spory NAME OF CORPORATION: DOCUMENT NUMBER: \_ 2790500077 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Firm/ Company E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 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 Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy

## **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

is enclosed)

## Articles of Amendment to Articles of Incorporation

ticles of incorpor of

Mc Farlin Feed a Supply 1 Inc	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P1700000075	
(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 its Articles of Incorporation:	, amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the ab "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must c word "chartered," "professional association," or the abbreviation "P.A."	breviation
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)	<del></del>
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:, Florida,	
(City) (Zip Ci	ode)
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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			<del></del>
2) Change	<u></u>		
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add		- ·	
Remove			

ach additional she	ng additional Articles rets, if necessary). (E	Be specific)	_		
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n amendment pro	ovides for an exchang	e, reclassification,	or cancellation of	issued shares,	
if not applicable)	ementing the amendme, indicate N/A)	ent if not contain	ed in the amendme	nt itself:	
				_ <del>_</del>	
	-	<u> </u>			
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<del></del>		<del></del>	<del>_</del>		
		-	<u> </u>		
		<u> </u>	<del></del>		<del>-</del>

The date of each amendment(s) adoption:date this document was signed.	1/1/18	, if other than the
Effective date if applicable:	(no more than 90 days after amen	dment file date)
Note: If the date inserted in this block does n document's effective date on the Department of	ot meet the applicable statutory fili State's records.	ing requirements, this date will not be listed as the
Adoption of Amendment(s) (CH	ECK ONE)	
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for a	shareholders. The number of votes approval.	cast for the amendment(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting	shareholders through voting group group entitled to vote separately or	s. The following statement the amendment(s):
"The number of votes cast for the amer	idment(s) was/were sufficient for ap	proval
by	ing group)	
(vot	ing group)	
☐ The amendment(s) was/were adopted by the action was not required.	board of directors without sharehold	ler action and shareholder
☐ The amendment(s) was/were adopted by the action was not required.	incorporators without shareholder ac	ction and shareholder
Dated 1-12-	λį	
Signature X	e M. Fachi	
(By a diffector, phesi	dent or other officer - if directors o	r officers have not been
selected, by an inco	rporator – if in the hands of a receive by that fiduciary)	ver, trustee, or other court
	·	
	Jern: Fer Mc Typed or printed name of person sig	-Farlin
(	Typed or printed name of person sig	gning)
	Presiden	_
	(Title of person signing)	<del></del>