P17000067936

(R	'equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	City/State/Zip/Phone #)	
PICK-UP	WAIT MAIL	
(B	Business Entity Name)	
(D	Occument Number)	
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COVER LETTER

TO: Amendment Section Division of Corporations

1

NAME OF CORPO	ORATION: Green Life Farms,	Inc.	<u> </u>		
DOCUMENT NUN	IBER: P17000067930		,		
	s of Amendment and fee are su	bmitted for filing.			
Please return all corr	espondence concerning this ma	itter to the following:			
	Robert Desrosiers				
		Name of Contact Perso	on		
	Green Life Farms, Inc.				
	Firm/ Company				
	1 Cate Street, Suite 100				
		Address			
	Portsmouth, NH 03801				
		City/ State and Zip Coo	de		
	kpayne@cs-ops.com				
	E-mail address: (to be us	sed for future annual repor	t notification)		
For further informati	on concerning this matter, pleas	se call:			
Katelyn Payne		at (319-4485		
Name	of Contact Person	Area Co	ode & Daytime Telephone Number		
Enclosed is a check t	or the following amount made	payable to the Florida Dep	partment of State:		
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
An Div P.C	niling Address nendment Section vision of Corporations D. Box 6327 dahassee, FL 32314	Amen Divisi The C 2415	t Address dment Section on of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 massee, FL 32303		

Articles of Amendment to Articles of Incorporation of

Green Life Farms, Inc.	
(Name of Corporation as curren	itly filed with the Florida Dept. of State)
P17000067930	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, thi its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corporation:	
	27
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc." or "Co". "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
,	
C. F. d	
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 ad-	
new registered agent and/or the new registered office addre	<u>ss:</u>
Name of New Registered Agent	
(Florida s	street address)
New Registered Office Address:	, Florida
Hen Regimered Office Padress.	(City) (Lip Code)
New Registered Agent's Signature, if changing Registered Ager hereby accept the appointment as registered agent. I am familiar	nt: with and accept the obligations of the position
neren accept me appointment as registered agent. Tom jaminar	wan and decept the veriganous of the position.
Signature of New	Registered Agent, if changing
Check if applicable	

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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	171	John Doc	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) X Change	CEO	John Halle	1 Cate St, Suite 100
Add			Portsmouth, NH 03801
Remove 2) X Change	Pres.	John Halle	I Cate St, Suite 100
Add			Portsmouth, NH 03801
Remove 3.) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti (Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)	
<u></u>		
		 .
		<u>.</u>
		
		
 -		
If an amendment provides for an exch	ange, reclassification, or cancellation of issued shar	es,
provisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:	_
· · · · · · · · · · · · · · · · · · ·		·

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The date of each amendment(s date this document was signed.	adoption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirement Department of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareho	older action and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the ame sufficient for approval.	endment(s)
	approved by the shareholders through voting groups. The followin for each voting group entitled to vote separately on the amendmen	
"The number of votes e	ast for the amendment(s) was/were sufficient for approval	
by	3	
· · · · · · · · · · · · · · · · · · ·	(voting group)	
3/22/20 Dated	21	
Signature	Zaul a	
(By sele	a director, president or other officer – if directors or officers have a cted, by an incorporator – if in the hands of a receiver, trustee, or cointed fiduciary by that fiduciary)	
	Robert Desrosiers	
	(Typed or printed name of person signing)	
	Vice President	
	(Title of person signing)	