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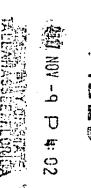
(Requestor's Name)				
(Address)				
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P WAIT	MAIL			
(Business Entity Name)				
(Document Number)				
Certificates of	Status			
to Filing Officer:				
	(Address)  (Address)  (City/State/Zip/Phone #)  WAIT  (Business Entity Name)  (Document Number)  Certificates of			





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NOV 1 3 2017 T. LEMIEUX



## **COVER LETTER**

Division of Corporations **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: annemarie, rouse@amai 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: \$43.75 Filing Fee & Certificate of Status ☐ \$35 Filing Fee □\$43.75 Filing Fee & □\$52.50 Filing Fee 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 to Articles of Incorporation

Horticulture LEC	Lighting Systems, Inc.
(Name of Corporation as current	tly filed with the Florida Dept. of State)
12170000 SII	29
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	
A. If amending name, enter the new name of the corporation:	
LED Cultivation, Inc.	The new
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	<u>n/a</u>
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u> )	n/a
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address	
Name of New Registered Agent // O	
(Florida s	treet address)
New Registered Office Address:	, Florida
Now Designated Assessing Street, as if showing Designated Assessing	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familian	
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	ne	
X Remove	<u>V</u>	Mike Jo		
X Add	<u>sv</u>	Sally Sr	<u>mith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change	PC	_	Austin M. Rouse	
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change	<u> </u>			·
Add				<u> </u>
Remove				•
6) Change				
Add				
Damaria				

tach additional sheets, if necessary).				
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an amendment provides for an exch	ange, reclassification	on, or cancellation o	f issued shares,	
rovisions for implementing the amer (if not applicable, indicate N/A)	<u>ndment it not conta</u>	inea in the amenam	ent useu:	
N/q				
				· · · · · · · · · · · · · · · · · · ·

The date of each amendment(s) adoption:	ovember	6,20	17	_, if other than the
Effective date <u>if applicable</u> : (no	more than 90 days a	fter amendment file	date)	-10-1-0-1
Note: If the date inserted in this block does not med document's effective date on the Department of State's		tutory filing require	ments, this date will	not be listed as the
Adoption of Amendment(s) (CHECK	ONE)	-		
The amendment(s) was/were adopted by the shareholders was/were sufficient for approv	nolders. The number	of votes cast for the	e amendment(s)	
☐ The amendment(s) was/were approved by the share must be separately provided for each voting group				
"The number of votes cast for the amendmen	t(s) was/were sufficient	ent for approval		
by		,,, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		
(voting gr	roup)			
☐ The amendment(s) was/were adopted by the board action was not required.	of directors without	shareholder action a	and shareholder	
The amendment(s) was/were adopted by the incorpaction was not required.	porators without share	eholder action and s	hareholder	
Dated November Signature Cluut	6,201	7		
Signature	am Too	la-		<del></del>
(By a director, president of				
selected, by an incorpora appointed fiduciary by the		or a receiver, trustee	, or other coun	
Ann	e-Marie	Rouse		
/	e-Marre d or printed name of	person signing)		<del></del>
	CEO			

(Title of person signing)