P18000103076

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: FLORIDA FINES	T HONEY INC.	
DOCUMENT NUMB	ER: P18000103076	· · · · · · · · · · · · · · · · · · ·	
	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	condence concerning this ma	tter to the following:	
}	MALCOLM E BRINSON		
-		Name of Contact Person	1
į	FLORIDA FINEST HONEY	INC.	
-		Firm/ Company	
i	PO BOX 2157	7 mis Company	
-		Address	
ı	JMATILLA, FL 32784		
-		City/ State and Zip Code	2
For further information	E-mail address: (to be us	sed for future annual report se call:	notification)
MALCOLM E BRINS	ON	at (<u>352</u>	227-9640 de & Daytime Telephone Number
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amer Divis P.O. I	ng Address adment Section ion of Corporations Box 6327 nassee, FL 32314	Amend Divisio Clifton	Address ment Section or Corporations Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

FLORIDA FINEST HONEY INC.

			_	_	
MAL 9102	J	ſ	PH	 :	55
SECRET.					

(Name of Corporation as currently	filed with the Florida Dept. of State
P18000103076	
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Torida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
FLORIDA'S FINEST HONEY INC.	The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "C word "chartered," "professional association," or the abbreviation "P	o". A professional corporation name must contain the
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)	·
D. If amending the registered agent and/or registered office addressive registered agent and/or the new registered office address:	ss in Florida, enter the name of the
Name of New Registered Agent	
(Florida stree	(address)
New Registered Office Address:	. Florida
	n, i
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi	th and accept the obligations of the position.
Signature of New Reg	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 = 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	$\mathbf{p}_{\mathbf{T}}$	John Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> 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			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			-
6) Change			
Add			
Remove			

<u>lf amending or adding</u> Attach <i>additional sheet</i> :	s, if necessary).	(Be specific)				
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<u> </u>			.	_	<u>-</u>	
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f an amendment prov	ides for an exch	ange, reclassific	ation, or cancel	lation of issue	d shares,	
provisions for implem	enting the ame	ndment if not co	ntained in the a	mendment its	elf:	
(if not applicable,	indicate N/A)					
						
			<u> </u>			
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The date of each amendment(s) adoption: DVDS VG, if other than the date this document was signed.
Effective date if applicable: (no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
☐ 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.
Signature (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)
(Typed or printed name of person signing)
President (Title of person signing)