## 00000

(Re	equestor's Name)	_
(Ad	ldress)	
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(Cit	ty/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		-
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Office Use Only



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## **COVER LETTER**

Department of State

New Filing Section

Division of Corporations

P. O. Box 6327

Tallahassee. FL 32314

SUBJECT: Hemptotic Farms Include SU

inclosed are an orig	inal and one (1) copy of the ar	ATE NAME = MUST INCL!	
\$70.00 Filing Fee	S78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	Filing Fee. Certified Copy & Certificate of Status

FROM: Hempnotic Farms Inc. Name (Printed or typed)
2413 main Street Address
Miramar FL 33025 City. State & Zip
702 210 - 5864  Daytime Telephone number
hempnotic farm a mail. com  F-mil address: (to be used for future amusi report notification)

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

The name of the corporation shall be: Hempn	10tic F	arms, Ir	<u> </u>
Principal street address		Mailing add	ress, if different is:
8174 Las Vegas Blvd(S)Ste Las Vegas NV 89123			ain Street KL 33025
The purpose for which the corporation is organized is:	agricu	ltural	
The number of shares of stock is: (100,000 DIRECTOR OF SHARES		ne Hundrec	Million
Name and Title: Timothy Bo		Mil hitle:	
Address 2413 Main Stre	eet Addr		
Miramar, FC 3	<u> </u>		
Name and Title:	Name	e and Title:	2019
Address	Addr	ress:	
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Name and Title:		e and Title:	75 E
Address			31 w
		<del></del>	

Name and Title:	Name and Title:
Address	Address:
<del></del>	
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT acceptabl	e) of the registered agent is:
Name: Timothy Battle	<u></u>
Address: 24/3 Main Street	
Miramar FL 330:	25
manar ve, 500.	
ARTICLE VII INCORPORATOR	
The name and address of the incorporator is:	
Name: Timothy Bottle Address: 2413 Main Street	
Address: 2413 Main Street	
Miramar FL 331	725
<u></u>	
ARTICLE VIII EFFECTIVE DATE:	
Effective date, if other than the date of filing:	(OPTIONAL)
(If an effective date is listed, the date must be specific and ca filling.)	mnot be more than five days prior or 90 days after the
•	
<u>Note:</u> If the date inserted in this block does not meet the applicate the document's effective date on the Department of State's reco	
	7 7 7 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Having been named as registered agent to accept service of prothis certificate, I am familiar with and ageept the appointment a	ocess for the above stated corporation at the place designated in
tins certificate, I am jamagir with and affects the appointment a	s registered agent una agree to act in this capitaly
1 Satt	1/3/2019
Required Signature/Registered Agent	
I submit this document and affirm that the facts stated herein document to the Department of State constitutes a third degree j	are true. I am aware that the false information submitted in a-
Michigan in the inclumination state grasmacs a mind degree	[3]
Respired Signature/Incorporator	