## PIGODODO BLOBA

(Re	questor's Name)	
(Ad	dress)	
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(Cit	ry/State/Zip/Phone	e #)
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(Do	cument Number)	
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10/04/19--01019--014 \*\*





## **COVER LETTER**

P.O. Box 6327

Tallahassee, FL 32314

TO: Amendment Section Division of Corporations	
NAME OF CORPORATION: RN Hydrofarms Corp.  DOCUMENT NUMBER: P1900003606	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	ř
Juergen Hartwich  Best Florida Consulting LLC  Firm/Company  1110 SW 28th Street  Address  Cape (oral Fl 33914  City/Strite and Zip Code  Thartwich & hotmail.com  E-mail andress: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Juergen Hartwich at (239) 573-9601 Number of Contact Person Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department of State:	
\$35 Filing Fee	
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of Corporations	

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment

to

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		10	
Articles	of	Incorporation	1

	of	
RN Hudro	Farms Corp.	
(Name of Corne	oration as currently filed with the Florida Dept. of	State) %
7 100 7	1000200C	
<u> </u>	70003006	<u> </u>
(De	ocument Number of Corporation (if known)	` <b>L</b>
Pursuant to the provisions of section 607.1006, Flats Articles of Incorporation:	lorida Statutes, this <i>Florida Profit Corporation</i> adopts	the following amer
A. If amending name, enter the new name of th	he corporation:	
		The i
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Coord" chartered," "professional association," or	word "corporation," "company," or "incorporate Corp," "Inc," or "Co". A professional corporation r the abbreviation "P.A."	d" or the abbrevia
B. Enter new principal office address, if applic		
(Principal office address <u>MUST BE A STREET</u>	<u>ADDRESS</u> )	_
		<del></del>
C. Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE)	E BOX	
	gistered office address in Florida, enter the name of ered office address:	the
new registered agent and/or the new registe		
Name of New Registered Agent		
-	(Florida straat address)	
-	(Florida street address)	
		rida

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and t 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; Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter 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 a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT of Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	PT John I	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	Jones	
_X Add	SV Sally	Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VP,S	Montz Neumann	Forstst. 13
Add	•		Bretzfeld, BW
X Remove			75626 GE
2) Change	VP,S	Martin Ruf	Ronda Migjorn 93
X Add			LLucmayor MA
Remove 3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			<del></del>
Remove			

Attach additional sheets, if necessary). (Be specific)	
/	
	ncellation of issued shares.
If an amendment provides for an exchange, reclassification, or ca	<del></del>
provisions for implementing the amendment if not contained in t	the amendment itself:
If an amendment provides for an exchange, reclassification, or ca provisions for implementing the amendment if not contained in t (if not applicable, indicate N/A)	the amendment itself:
provisions for implementing the amendment if not contained in t	the amendment itself:
provisions for implementing the amendment if not contained in t	he amendment itself:
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provisions for implementing the amendment if not contained in t	he amendment itself:
provisions for implementing the amendment if not contained in t	he amendment itself:

The date of each amendment(s) adoption:	, if oth
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file d	ne)
Note: If the date inserted in this block does not meet the applicable statutory filing requirem document's effective date on the Department of State's records.	ents, this date will not be list
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the above the shareholders was/were sufficient for approval.	mendment(s)
The amendment(s) was/were approved by the shareholders through voting groups. The follow must be separately provided for each voting group entitled to vote separately on the amendation.	wing statement
"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 an action was not required.	d shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	reholder
Dated 09/28/2019	
Signature Pro	
(By a director, president or other officer - if directors or officers has	ve not been
selected, by an incorporator if in the hands of a receiver, trustee, or	ir other court
appointed fiduciary by that fiduciary)	
Martin Ruf (Typed or printed name of person signing)	
() I	
<u> </u>	<del></del>
(Title of person signing)	