

P21 000065552

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

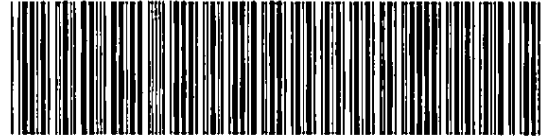
☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_



100371728881

09/16/21--01041--020 \*\*35.00

Special Instructions to Filing Officer:

Received 9/16/21  
Deana Olsen gave me permission  
over the phone add ... as a  
P, TRE, SEC, VP and DIR. He  
gave me permission to remove  
Janice C. Scrappa as the P,  
TRE, SEC, VP, and DIR. Deana

Olsen's phone number is

Office Use Only

(934)-777-0069.

Anissa Butler 9/16/21

FILED  
2021 SEP 16 PM 4:19  
SECRETARY OF STATE  
TALLAHASSEE, FL

A. Butler  
9/16/21

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Hemplifened Corp.

DOCUMENT NUMBER: P21000065552

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sonia Becerra  
Name of Contact Person  
Swyft Filings  
Firm/ Company  
3 Greenway Plaza #1320  
Address  
Houston, TX 77046  
City/ State and Zip Code  
filings@swyftfilings.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sonia Becerra at ( 877 ) 777-0450  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |   |  |   |  |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy<br>is enclosed) |
|---|--|---|--|

**Mailing Address**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**  
Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Articles of Amendment  
to  
Articles of Incorporation  
of

Hemplifemed Corp.

(Name of Corporation as currently filed with the Florida Dept. of State)

P21000065552

2021 SEP 16 PM 4:19

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co." A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

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 address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent Deana Olsen

3128 El Camino Real

(Florida street address)

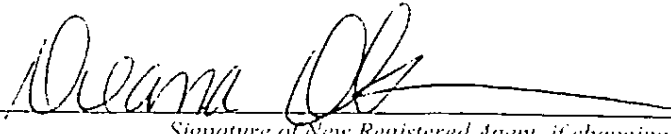
New Registered Office Address: West Palm Beach, Florida 33409

(City)

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations 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)

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:

☒ Change      PT      John Doe  
☐ Remove      V      Mike Jones  
☐ Add      SV      Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input checked="" type="checkbox"/> Change	P	Deana Olsen	3128 El Camino Real
<input checked="" type="checkbox"/> Add AB 9/16			West Palm Beach, FL 33409
<input type="checkbox"/> Remove			
2) <input checked="" type="checkbox"/> Change	TRE	Deana Olsen	3128 El Camino Real
<input checked="" type="checkbox"/> Add AB 9/16			West Palm Beach, FL 33409
<input type="checkbox"/> Remove			
3) <input checked="" type="checkbox"/> Change	SEC	Deana Olsen	3128 El Camino Real
<input checked="" type="checkbox"/> Add AB 9/16			West Palm Beach, FL 33409
<input type="checkbox"/> Remove			
4) <input checked="" type="checkbox"/> Change	VP	Deana Olsen	3128 El Camino Real
<input checked="" type="checkbox"/> Add AB 9/16			West Palm Beach, FL 33409
<input type="checkbox"/> Remove			
5) <input checked="" type="checkbox"/> Change	DIR	Deana Olsen	3128 El Camino Real
<input checked="" type="checkbox"/> Add AB 9/16			West Palm Beach, FL 33409
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

The date of each amendment(s) adoption: 7/23/2021 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)

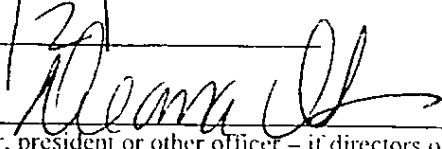
☒ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.

☐ 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):

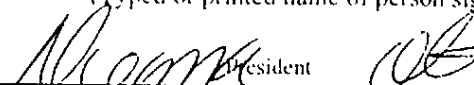
"The number of votes cast for the amendment(s) was/were sufficient for approval

by \_\_\_\_\_  
(voting group)

Dated 7/30/21  
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)

Deana Olsen

(Typed or printed name of person signing)

  
President  
(Title of person signing)



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 25, 2021

SONIA BECERRA  
3 GREENWAY PLAZA #1320  
HOUSTON, TX 77046 US

SUBJECT: HEMPLIFEMED CORP.  
Ref. Number: P21000065552

We have received your document for HEMPLIFEMED CORP. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

THE OFFICERS HAVE ON YOUR FILING ARE NOT ON SUNBIZ.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler  
Regulatory Specialist II

Letter Number: 921A00020383