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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: F3T Farms, Inc.		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	itter to the following:	
	Cory Baker		
		Name of Contact Persor	1
	F3T Farms, Inc.		
		Firm/ Company	
	3127 NW 69 Street	. ,	
		Address	
	Fort Lauderdale, FL 33309		
		City/ State and Zip Code	3
	Name of Contact Person F3T Farms. Inc. Firm/ Company 3127 NW 69 Street Address Fort Lauderdale, FL 33309 City/ State and Zip Code F3TFarms@gmail.com E-mail address: (to be used for future annual report notification) ther information concerning this matter, please call: aker at (310) 8492050 Name of Contact Person Area Code & Daytime Telephone Number d is a check for the following amount made payable to the Florida Department of State:		
	-		
For further information	on concerning this matter, pleas		8492050
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check f	or the following amount made		
■ \$35 Filing Fee	<u> </u>	Certified Copy (Additional copy is	Certificate of Status Certified Copy (Additional Copy
An Div P.C	rision of Corporations D. Box 6327	Amend Divisio The Co	ment Section n of Corporations entre of Tallahassee

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(<u>Name</u>	of Corporation as curren	tly filed with the Florida Dept. of State)	.s.	,	
P22000070252			_ <u>[</u>]	<u>~</u>	
	(Document Number	of Corporation (if known)	LO;		
Pursuant to the provisions of section 607	1006 Florida Statutes, this	Florida Profit Corporation adopts the folio	ے ۔:	⊃ ent(s)	
its Articles of Incorporation:	. 1000, 1 forida Statutes, dis	7 torial 1 roji. Corporation adopts the tone	wine directions	(5)	
A. If amending name, enter the new n	ame of the corneration:				
N/A	anie of the corporation.				
	10	" or "in a three t	The new		
name must be distinguishable and contail "Inc.," or Co.," or the designation "("chartered," "professional ussociation,"	Corp," "Inc," or "Co".	"company," or "incorporated" or the abbrev. A professional corporation name must col "			
3. Enter new principal office address.	if applicable:	3127 NW 69 Street			
Principal office address <u>MUST BE A.S</u>	STREET ADDRESS)	Fort Lauderdale, FL 33309			
C. Enter new mailing address, if appl	l <u>icable:</u>	3127 NW 69 Street			
(Mailing address MAY BE A POST OFFICE BOX)					
		Fort Lauderdale, FL 33309			
 If amending the registered agent as new registered agent and/or the ne 		iress in Florida, enter the name of the			
	N/A	<u></u>			
Name of New Registered Agent					
	(Florida si	treet address)			
New Registered Office Address:	N/A	, Florida			
		(City)	Zip Code)		
New Registered Agent's Signature, if c	thanging Registered Agen tered agent I am familiar	 t: with and accept the obligations of the position 	on		
neres, accept the appointment as regis	ierea agem. Pam jammar	with the accept the congainme of the position			
	Signature of New I	Registered Agent, if changing			
Cheek if applicable					
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, an 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 = Chie 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 i. 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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) X Change	S	Edwin Colon	3127 NW 69 Street
Add			Fort Lauderdale, FL 33309
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach a	ding or adding additional Articles additional sheets, if necessary). (I	Be specific)			
N/A					
<u> </u>			· · · · · · · · · · · · · · · · · · ·		
<u> </u>		<u> </u>	·		
		. <u>.</u>			· · · · · · · · · · · · · · · · · · ·
					
		. <u> </u>			· · · · · · · · · · · · · · · · · · ·
	<u> </u>		<u> </u>		
					
		_ 			
F. Ifanam	nendment provides for an exchans	e. reclassificatio	n, or cancellatio	on of issued shares	i.
provisi	ions for implementing the amendr	nent if not conta	ined in the amer	idment itself:	_
	not applicable, indicate N/A)				
N/A					
	<u> </u>				
					
·····					
					<u> </u>

•	N/A	
The date of each amendment(s) a	doption:	, if other than
date this document was signed.		
N/A Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirements, this date will epartment of State's records.	I not be listed a
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without shareholder action and	d shareholder
☐ The amendment(s) was/were ad- by the shareholders was/were st	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.	
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	2022 NOV 22 AND SEC ALTERNOS ÉCONOS DO
"The number of votes cast	for the amendment(s) was/were sufficient for approval	그 뭐
by		22 ECIL
	(voting group)	2022 NOV 22 AUTS: 04 ALLEH ASSÉL ATTÖRBÖ
11/15/22		58: P
DatedSignature		~. +
(By a d	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	_
	Cory Baker	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	