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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Star Hemp Holding	gs, Inc.	
DOCUMENT NUME	$D^{AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA$		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	Robert Menzies		
		Name of Contact Persor	<u> </u>
	FisherBroyles, LLP		
	.	Firm/ Company	
	3606 Enterprise Avenue, Suit	te 225	
		Address	
	Naples, FL 34104		
		City/ State and Zip Code	
	robert.menzies@fisherbroyle	s.com	
	E-mail address: (to be us	ed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
Robert Menzies		239 at (293-3945
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327	Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Star Hemp Holdings, Inc.	
(Name of Corporation as c	currently filed with the Florida Dept. of State)
P22000076086	
(Document Nu	umber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutits Articles of Incorporation:	tes, this Florida Profit Corporation adopts the following amendment
A. If amending name, enter the new name of the corporat	tion:
Star Health Holdings, Inc.	The new
name must be distinguishable and contain the word "corporat "Inc.," or Co.," or the designation "Corp," "Inc," or "e "chartered," "professional association," or the abbreviation	tion," "company," or "incorporated" or the abbreviation "Corp.," Co". A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>	2024
	- 13 - 3 - 3 - 5
	<u> </u>
C. Enter new mailing address, if applicable:	2 2
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>
D. If amending the registered agent and/or registered offinew registered agent and/or the new registered office a	
Name of New Registered Agent	
(Fig.	forida street address)
New Registered Office Address:	, Florida
•	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa	
Signature of	f 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 Doc 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	PT	John Doc	
X Remove	<u>v</u>	Mike Jones	
X 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			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)	
-		
		_
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:	
, , , , , , , , , , , , , , , , , , , ,		

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	April 28, 2024	
The date of each amendment(s) ado date this document was signed.		, if other than the
May 1 Effective date if applicable:	. 2024	
	(no more than 90 days after amendmen	ı file date)
Note: If the date inserted in this blod document's effective date on the Depa	ck does not meet the applicable statutory filing re rtment of State's records.	quirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were adopt action was not required.	ed by the incorporators, or board of directors with	out shareholder action and shareholder
☐ The amendment(s) was/were adopt by the shareholders was/were suffi	ed by the shareholders. The number of votes cast feient for approval.	for the amendment(s)
	ved by the shareholders through voting groups. The ch voting group entitled to vote separately on the c	
"The number of votes cast fo	r the amendment(s) was/were sufficient for approv	al
by		**
	(voting group)	
April 28, 202 Dated		
Signature		
selected,	ofor, president of other officer – if directors or officer of the original of a receiver, to diductary by that fiductary)	cers have not been rustee, or other court
R	obert Menzies	
_	(Typed or printed name of person signing	*)
_	(Title of person signing)	

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