246959

(Re	questor's Name)		
(Add	dress)		
(Add	dress)		
(City	y/State/Zip/Phone	e #)	
PICK-UP	WAIT	MAIL	
(Bus	siness Entity Nar	ne)	
(Doc	cument Number)		
Certified Copies	Certificates	s of Status	
Special Instructions to Filing Officer:			

Office Use Only



600428913606

NC Amena



A RAMSEY
A POPU

20: 44 12 PH 2: 02

X02250,02544,02974,00671

CT CORP

(850) 656-4724 3458 lakesore Drive Tallahassee, FL 32312

05/21/2024

Da	ate:	05/21/2024	- will
		Acc#I20160000072	- 4: C) - W
Name:	Planet 13	Florida Inc.	
Document #:	-		
Order #:	15554487	- 6	
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of			
Apostille/Notarial Certification:		Country of Destination:	
Filing: 🚺	Certifie Plain: COGS:	d: 🔽	Email Address for Annual Report Notifications:
Availability Document Examiner Updater Verifier W.P. Verifier	Amoun	t:\$ 43.75	

Thank you!



May 22, 2024

CT CORP

TALLAHASSEE, FL 32312

SUBJECT: PLANET 13 FLORIDA INC.

Ref. Number: 246959

CORRECTED

Please Allow For Same File Date

We have received your document for PLANET 13 FLORIDA INC. and the authorization to debit your account in the amount of \$43.75. However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L20000166872.

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.

Annette Ramsey OPS

Letter Number: 624A00011217

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	RATION: Planet 13 Florida I	nc.	
DOCUMENT NUM			
	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	Spencer Brown		
		Name of Contact Persor	1
	Burr Forman LLP		
		Firm/ Company	
	1075 Peachtree Street, NE, S	uite 3000	
		Address	
	Atlanta, Georgia 30309		
		City/ State and Zip Code	2
	shbrown@burr.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
or rander information	on concerning this matter, prom	e can.	
Spencer Brown		404 at (685-4264
Name of Contact Person		at (404) 685-4264 Area Code & Daytime Telephone Number	
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	⊠\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		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

FILED AM 9:29

	C C
(Name of Corporation as cur	trrently filed with the Florida Dept. of State)
246959	ुर्भ भूति दिन्दि ।
(Document Num	mber of Corporation (if known)
ursuant to the provisions of section 607.1006, Florida Statutes s Articles of Incorporation:	s, this Florida Profit Corporation adopts the following amendment(s
. If amending name, enter the new name of the corporation	ion:
Fino Brands, Inc.	The new
	on," "company," or "incorporated" or the abbreviation "Corp.," o". A professional corporation name must contain the word
8. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>))
. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
 If amending the registered agent and/or registered office new registered agent and/or the new registered office ad 	
Name of New Registered Agent	
(Flor	rida street address)
(Flor New Registered Office Address:	rida street address)

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: X Change	<u>PT</u>	John Doe		
X Remove	$\underline{\mathbf{V}}$	Mike Jones	<u>s</u>	
X Add	<u>SV</u>	Sally Smit	<u>h</u>	
Type of Action (Check One)	<u>Title</u>	<u>N</u>	<u>ame</u>	Address
1) Change				
Add				
Remove				
2) Change				
Add				
Remove 3) Change				
Add				
Remove				
4) Change			,	
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

If amending or adding additional Art (Attach additional sheets, if necessary).	(Be specific)
-	
	-
	
If an amandment provides for an axa	hange, reclassification, or cancellation of issued shares,
nrovisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	1.0.10.1

· · · · · · · · · · · · · · · · · · ·	

.

The date of each amendment(s) a late this document was signed.	doption:	, if other than the
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 D	block does not meet the applicable statutory filing requirement epartment of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adaction was not required.	opted by the incorporators, or board of directors without shareho	older action and shareholder
The amendment(s) was/were adby the shareholders was/were so	opted by the shareholders. The number of votes cast for the am officient for approval.	endment(s)
	proved by the shareholders through voting groups. The followin each voting group entitled to vote separately on the amendment	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
ſ	- DocuSigned by:	
	lack Freese	<u></u>
selecto	-867497914000400 irector, president or other officer – if directors or officers have d, by an incorporator – if in the hands of a receiver, trustee, or officer fiduciary by that fiduciary)	not been other court
	Jackson A. Freese	
	(Typed or printed name of person signing)	
	Director	
	(Title of person signing)	