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COVER LETTER

Divisio	n of Cor	porations		
. CA	NNAME	DICUS, LLC	•	
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed Ar	ticles of	Amendment and fee(s) are sub-	mitted for filing.	
		ndence concerning this matter	-	
		Michael J. Chaparro		
			Name of Person	
		DENISYS, LLC		
			Firm/Company	
		3120 SW 25th St.		
			Address	
		Miami, Fl 33133		
		mjchaparro09@gmail.con	City/State and Zip Code	
			to be used for future annual report notifi	ication)
For further infor	mation c	oncerning this matter, please ca	all:	
Michael J. Cha	parro		305 746-4449 at ()	
	Name o	f Person		Telephone Number
Enclosed is a che	eck for th	ne following amount:		
□ \$25.00 Filin	ng Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	z Addres tration S		Street Address: Registration Sec	tion

Registration Section Division of Corporations P.O. Box 6327

TO:

Registration Section

Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

Bolly Co. **OF**

CANNAMEDICUS, LLC	Ty V
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company lorida document number L20000012218	
his amendment is submitted to amend the following:	
If amending name, enter the new name of the limited liab	pility company here:
DENISYS, LLC	
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:	3120 SW 25th St.
Principal office address MUST BE A STREET ADDRESS)	Miami, FI 33133
nter new mailing address, if applicable:	3120 SW 25th St.
Mailing address MAY BE A POST OFFICE BOX)	Miami, FI 33133
If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	
	Enter Florida street address
	Flo≕do

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

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

City

Zip Code

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	Name	Address	Type of Action
			🗀 Add
			□ Remove
			Change
			□Add
			□Remove
			□Change
			□ Remove
			□Change
			🗀 Add
			□ Remove
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

-	
We	are amending the purpose of the Limited Liability Corporation as follows:
Pre	vious Purpose: "ANY AND ALL LAWFUL BUSINESS RELATED TO CANNABIS" to
"DE	DICATED TO THE PRODUCTION OF DERIVATIVES OF NATURAL PRODUCTS FOR GENERAL
HUI	MAN AND ANIMAL WELLBEING"
	Jaka if akanaka aka Jaka ffilian
effecti <u>:</u> If t	date, if other than the date of filing:
ord sp filed.	becifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after to
d	Victorial Colled'
	Signature of a member or authorized representative of a member