N190000 10314

(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer	
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Office Use Only



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R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, Fl. 32314

NAME OF CORPORATION:	FESTYLE MOVEM	ENT INC.	
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are sub		_	
Please return all correspondence concerning this mat	ter to the following:		
KOUSHIK R. REDDY			
	(Name of Contact P	erson)	
PLANT BASED LIFESTYLE MOVEMENT INC.			
	(Firm/ Compan	y)	
9713 MILANO DRIVE			
	(Address)	·	
TRINITY, FL 34655			
	(City/ State and Zip	Code)	
KOUSHIKREDDY@PBLM.ORG			
E-mail address: (to be used	for future annual re	port notificatio	n)
For further information concerning this matter, please	call;		
KOUSHIK R. REDDY	at	(727)	808-0883
(Name of Contact Person)		(Daytime Telephone Number)
Enclosed is a check for the following amount made pa	ayable to the Florida	Department of	State:
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certifi s Certifi	O Filing Fee icate of Status ied Copy tional Copy is sed)
Mailing Address Amendment Section Division of Corporations	Λn	reet Address nendment Secti	

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



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FLORIDA DEPARTMENT OF STATE Division of Corporations

May 20, 2020

KOUSHIK R. REDDY 9713 MILANO DR TRINITY, FL 34655

SUBJECT: PLANT BASED LIFESTYLE MOVEMENT INC

Ref. Number: N19000010314

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

If the corporation is a **NOT FOR PROFIT** corporation it must be signed by the chairman or vice chairman of the board, president or other officer - if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

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.

Letter Number: 620A00010211

Rebekah White Regulatory Specialist II Supervisor

www.sunbiz.org

Articles of Amendment to Articles of Incorporation of

PLANT BASED LIFESTYLE MOVEMENT IN	C	2.23
(Name of Corporation as currently filed with the	he Florida Dept. of State)	11 7: 9: 2
N19000010314		ν. ζ.
(Docu	ment Number of Corporation (if know	vn)
Pursuant to the provisions of section 617.1006, Fl amendment(s) to its Articles of Incorporation:	orida Statutes, this Florida Not For F	Profit Corporation adopts the following
A. If amending name, enter the new name of the	ne corporation:	
NOT APPLICABLE		
name must be distinguishable and contain the wor "Company" or "Co." may not be used in the nan	d "corporation" or "incorporated" (1e.	The new or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applic	NOT APPLICABLE	
(Principal office address MUST BE A STREET)	ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	NOT APPLICABLE	
D. If amending the registered agent and/or registered agent and/or the new register	istered office address in Florida, en	ter the name of the
	NOT APPLICABLE	
Name of New Registered Agent:		
	NOT APPLICABLE	
New Registered Office Address		a street address)
		, Florida
	(City)	(Zip Code)
lew Registered Agent's Signature, if changing less hereby accept the appointment as registered agent	Registered Agent: nt. I am familiar with and accept the	obligations of the position.
_		
	Signature of New Registered	Agent, if changing

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 <math>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 X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally Sn	<u>nes</u>	
Type of Action (Check One)	Title		Name	Address
1) Change Add	<u>T</u>	-	KOUSHIK R. REDDY	9713 Milano Drive Trinity, FL 34655
Remove				
2) Change Add	<u>S</u>	_	KRISTINE BUTLER	3333 W. Kennedy #103 Tampa, FL 3609
Remove 3) Change Add Remove	<u></u>	-		
4) Change Add		_		
Remove				
5) Change Add		-		
Remove				
6) Change Add		-		
Remove				
E. If amending or addin (attach additional shee	g additio ts, if nece.	onal Artic ssary).	cles, enter change(s) here: (Be specific)	

		
		
		
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The data of each amendment(s) admits	·	10 d d d
date this document was signed.	ion:	_, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block d document's effective date on the Department	loes not meet the applicable statutory filing requirements, this date will not ment of State's records.	be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopte was/were sufficient for approval.	ed by the members and the number of votes cast for the amendment(s)	

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
04/29/2020 Dated
Signature / Cowshill Medaful (By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
(Typed or printed name of person signing)
PRESIDENT (Title of person signing)