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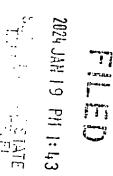
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATI	GABBY'S GROWN	NG TREASURE IN	1C			
DOCUMENT NUMBER:	N23000013358					
The enclosed Articles of A		omitted for filing.				
Please return all correspond	lence concerning this mat	ter to the following:				
TRACIE RIVERO						
		(Name of Contact	Person)			
		(Firm/ Compa	inv)			
17960 SW 3RD ST		` '	,			
		(Address)				
PEMBROKE PINES, FL 3	3029					
		(City/ State and Zi	p Code)			
tnava123@yahoo.com						
	E-mail address: (to be use	d for future annual r	eport notif	ication	n)	
For further information con	cerning this matter, please	e call:				
Tracie Rivero		į	954 at		391-2141	
	(Name of Contact Person			ode)	(Daytime Telephone Number	r)
Enclosed is a check for the	following amount made p	payable to the Florida	a Departm	ent of	State:	
≡ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fe Certified Copy (Additional copy enclosed)	<i>r</i> is	Certifi Certifi	D Filing Fee icate of Status ied Copy tional Copy is used)	
Mailing /	Address	_	treet Add		ian.	

Amendment Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

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

GABBY'S GROWING TREASURE INC.

FILED

		· • !
(Name of Corporation as currently filed with the Florida Dept. of State)	2024 1331 10	
N23000013358	2024 JAN 19	PH 1:43
(Document Number of Corporation (if kno		5371
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For</i> amendment(s) to its Articles of Incorporation:	Profit Corporation	adopts the following
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corporation" or "incorporated" "Company" or "Co." may not be used in the name.	or the abbreviation	
B. Enter new principal office address, if applicable: 17960 SW 3RD ST		
(Principal office address MUST BE A STREET ADDRESS) PEMBROKE PINES,	FL 33029	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
		-
D. If amending the registered agent and/or registered office address in Florida, enew registered agent and/or the new registered office address:	enter the name of th	<u>ıe</u>
Name of New Registered Agent:		
New Registered Office Address:	ida street address)	
	r., - ,	
(City)	, Florid (Zip	a Code)
·	•	ŕ
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the	ha obligations of the	manisian
Tum juminar with and accept in	ie obugunons oj me	ромнон.

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 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	PT John Do V Mike Jo SV Sally Si	ones	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change _x Add	CEO	TRACIE RIVERO	17960 SW 3RD ST PEMBROKE PINES, FL 33029
Remove			<u></u>
2) Change Add			
Remove 3) Change Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or adding (attach additional sheet Adding the incorporator.	ts, if necessary).		

	
	
	<u></u>
	
	
1/13/2024	
The date of each amendment(s) adoption: date this document was signed.	_, if other than the
Effective date if applicable:	
Effective date if applicable: (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records.	be listed as the
Adoption of Amendment(s) (CHECK ONE)	

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s)

was/were sufficient for approval.

Dated	1/13/2024
.>ated	
Signatur	
	(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)
	omer come appearance reactions of that reductions)
	Tracie Rivero
	•
	Tracic Rivero