## P04000 168847

(Re	questor's Name)	
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bA)	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
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## COVER LETTER

		<u>COVER LETTER</u>		
TO: Amendment Sec Division of Corp				20 July 30 Px 2 L
	DRATION: Protech Nutraceutic	rals, Inc		
NAME OF CORPO	ORATION:			
DOCUMENT NUM	IBER: P04000168847			جم جم
The enclosed Article	s of Amendment and fee are sul	omitted for filing.		5
Please return all corr	espondence concerning this ma	ter to the following:		
	Joseph J Moretti			
		Name of Contact Person		
	JDM Creative Solutions, Inc			
		Firm/ Company		
	15312 Valencia Del Sol St	-		
		Address	· · · · · · · · · · · · · · · · · · ·	
	Wimauma, FL 33598			
		City/ State and Zip Code		
	dshmoretti@aol.com			
	<del>-</del>	sed for future annual report	notification)	
		·		
For further informati	ion concerning this matter, pleas	se call:		
Donna Moretti		at ( 727	637-3913	
Name	e of Contact Person	Area Coo	le & Daytime Telephone Number	_
Enclosed is a check	for the following amount made	payable to the Florida Depa	irtment 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)	
Āī	ailing Address mendment Section ivision of Corporations	Amend	Address ment Section n of Corporations	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

**Division of Corporations** 

Tallahassee, FL 32314

P.O. Box 6327

## Articles of Amendment **Articles of Incorporation** of

the Florida Dept. of State)  n (if known)  fit Corporation adopts the following amendment(
fit Corporation adopts the following amendment
The new
or "incorporated" or the abbreviation "Corp.," all corporation name must contain the word
alencia Del Sol St
na, FL 33598
,

D. If amending the registered agent and/or registered office address in Florida, enter the name of the

new registered agent and/or the nev	w registere	ed office address:	
Name of New Registered Agent	N/A		
		(Florida street address)	
		tranta meet uutessy	
New Registered Office Address:	N/A		Florida
		(City)	(Zip Code)

15312 Valencia Del Sol St

Wimauma, FL 33598

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

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

N/A
Signature of 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 = ChiefExecutive 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.

X Change	<u>1'4</u>	<u>John Do</u>	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>mes</u>	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change		_	N/A	
Add				
Remove				
2) Change				
Add				
Remove Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

<b>L</b>		Articles, enter change). (Be specific)				
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If an amendment	t provides for an e	xchange, reclassifi	catio <u>n, or cancella</u>	tion of issued shar	es.	
provisions for it	mplementing the a	<u>imendment if not c</u>	ontained in the an	<u>nendment itself:</u>		
(if not applic	:able, indicate N/A	<b>)</b>				
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•	January 26, 2020	'A' alaaa alaaa ahaa
The date of each amendment date this document was signed		, if other than the
•	January 26, 2020	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	his block does not meet the applicable statutory filing requirements, this date the Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/wer action was not required.	re adopted by the incorporators, or board of directors without shareholder action a	and shareholder
☐ The amendment(s) was/wei by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
☐ The amendment(s) was/wei must be separately provide	re approved by the shareholders through voting groups. The following statement d for each voting group entitled to vote separately on the amendment(s):	
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by <u>N/A</u>		
	(voting group)	
Signature(B	y a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court oppointed fiduciary by that fiduciary)	
	Joseph J Moretti	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	