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COVER LETTER

TO: Amendment Section.
Division of Corporations

NAME OF CORPOR	ATION: Palm Trees Direct	. Inc.			
DOCUMENT NUMB					
The enclosed Articles of	of Amendment and fee are su	ibmitted for filing.			
Please return all corres	pondence concerning this ma	atter to the following:			
	William J. Demarest				
-	Name of Contact Person				
-	Firm/ Company				
	8440 Bay Pines Blvd.	, ,			
-	Address				
	Saint Petersburg, FL 33709				
-		City/ State and Zip Code			
PalmT	`reesDirect@gmail.com				
		sed for future annual report i	notification)		
For further information	concerning this matter, pleas	se call:			
Law Offices of Michael J. Heath			360-2771		
Name o	f Contact Person	at (727) 360-2771 Area Code & Daytime Telephone Number			
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment of State:		
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	■\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amendi Division Clifton	Address nent Section n of Corporations Building secutive Center Circle		

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation οf

	to .
Articles of	of Amendment to Incorporation of ently filed with the Florida Dept. of State) Page of Corporation (if known)
Palm Trees Direct, Inc.	10 V
(Name of Corporation as curre	ently filed with the Florida Dept. of State)
P07000032685	
(Document Numbe	er of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	his Florida Profit Corporation adopts the following amendment(s) is
A. If amending name, enter the new name of the corporation:	
Plant Logic Inc.	The new
name must be distinguishable and contain the word "corpora" ("Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," oword "chartered," "professional association," or the abbreviatio	ution," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	523 129th Ave E
(Principal office address MUST BE A STREET ADDRESS)	Madeira Beach, FL 33709
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	523 129th Ave E
	Madeira Beach, FL 33709
D. If amending the registered agent and/or registered office ac new registered agent and/or the new registered office addr Name of New Registered Agent	
new registered agent and/or the new registered office addr	
new registered agent and/or the new registered office addr Name of New Registered Agent	
new registered agent and/or the new registered office addr Name of New Registered Agent	ress:

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	V	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</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			

Allach ammann sparte it backseinni	ticles, enter change(s) here: (Re specific)
Attach additional sheets, if necessary).	(De specific)
, 1 - 7 - 1 1 	
	
it an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	<u> </u>
	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.		
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	is block does not meet the applicable statutory filing requirements, this dat Department of State's records.	e will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s sufficient for approval.)
	approved by the shareholders through voting groups. The following stateme for each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
by Albra D	emorest & William Demovest	
,	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholde	г
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
Dated 11/	21/18	
Signature(By	a director, president or other officer – if directors or officers have not been	
sele	eted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)	
	William J. Demarest	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	