P07000080728

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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: BOTANICA CHEMA, INC DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: PEDRO PENA Name of Contact Person BOTANICA CHEMA, INC Firm/ Company 1330 N JOHN YOUNG PKWAY Address KISSIMMEE FL 34741 City/ State and Zip Code PEDROODDARA04@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & □\$43.75 Filing Fee & S35 Filing Fee \$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy

enclosed)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

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

(Additional Copy is enclosed)

Articles of Amendment to Articles of Incorporation of

BOTANICA CHEMA, INC

(Name of Corporation as currently	filed with the Florida Dept. of State)	
P07000080728		
(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this Functions of Incorporation:	Torida Profit Corporation adopts the fo	ollowing amendment(s)
a. If amending name, enter the new name of the corporation:		
		The new
ame must be distinguishable and contain the word "corporation," "co Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A chartered," "professional association," or the abbreviation "P.A."		
. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		292
		<u>†</u>
. If amending the registered agent and/or registered office addre	ess in Florida, enter the name of the	P8 4: 44
new registered agent and/or the new registered office address:		
Name of New Registered Agent		<u></u>
(Florida stree	et address)	
New Registered Office Address:	. Florida	
	City)	(Zip Code)
ew Registered Agent's Signature, if changing Registered Agent:		
hereby accept the appointment as registered agent. I am familiar wi	ith and accept the obligations of the pos	ition.
Signature of New Reg	gistered Agent, if changing	
heck 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 = 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	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	v	HEMERSON PENA	1330 N JOHN YOUNG PKWAY
X Add	-		KISSIMMEE FL 34741
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change		<u> </u>	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		<u> </u>	
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
HEMERSON PENA should be V President
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)
•

	03/15/2020	
The date of each amendment(s) ad date this document was signed.	option:	, if other than the
03/15 Effective date <u>if applicable</u> :	5/2020	
<u>н арумсаже</u> .	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blocoument's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date will partment of State's records.	I not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopaction was not required.	oted by the incorporators, or board of directors without shareholder action and	l shareholder
The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast f	or the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
03/15/2020		20
Dated	\mathcal{O}_{Δ}	215
C:atum	Vd2	2021 F.:X — ti
	ector, president or other officer – if directors or officers have not been	— <u>!</u>
	by an incorporator – if in the hands of a receiver, trustee, or other court	P
••	d fiduciary by that fiduciary)	F: -'
	PEDRO PENA	11
•	(Typed or printed name of person signing)	
	PRESIDENT	
-	(Title of person signing)	