## P160000257-57

Office Use Only



000417864350

10/25/23--01006--014 \*\*43.75

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORP	ORATION: GROW INNOVA	TE INC.	
DOCUMENT NU	P16000025757		
The enclosed Articl	es of Amendment and fee are su	abmitted for filing.	
Please return all cor	respondence concerning this ma	atter to the following:	
	ANTHNY PALACIO		
		Name of Contact Persor	1
	PALACIO PALACIO ZIMM	IERMAN	
		Firm/ Company	<del></del>
	12002 SW 128 CT STE 106	, man example of	
		Address	
	MIAMI, FL 33186		
		City/ State and Zip Code	2
	ANTHONY@PPZLLC.COM	d	
	E-mail address: (to be us	sed for future annual report	notification)
For further informat	ion concerning this matter, plea	se call:	
ANTHONY PALACIO		305 at (	595-0303
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment 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)
A D P.	mendment Section ivision of Corporations O. Box 6327 allahassee, FL 32314	Amend Divisio The Co	Address Iment Section In of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

GROW INNOVATE INC.			
(Name of Corporation	n as currently filed with	the Florida Dept. of State)	
P16000025757			
(Docume	ent Number of Corporation	on (if known)	
Pursuant to the provisions of section 607,1006, Florida its Articles of Incorporation:	Statutes, this Florida Pre	ofit Corporation adopts the follo	iwing amendment(s)
A. If amending name, enter the new name of the con	rporation:		
			The new
name must be distinguishable and contain the word "con"Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbrev	or "Co". A profession		
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDI</u>			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	<u></u>		
			· · · · · · · · · · · · · · · · · · ·
D. If amending the registered agent and/or registered new registered agent and/or the new registered o		ida, enter the name of the	
Name of New Registered Agent			
			ــ ـ ـ لىد، ــــــــــــــــــــــــــــــــــــ
	(Florida street address)		
New Registered Office Address:		, Florida	
	(City)	(	Zip Code)
New Registered Agent's Signature, if changing Regist hereby accept the appointment as registered agent. I		rept the obligations of the positi	on.
Signat	ture of New Registered A	gent, 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 = 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 F. 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> <u>Joh</u>	n <u>Doe</u>	
X Remove	<u>v</u> <u>Mik</u>	ke Jon <u>es</u>	
<u>X</u> Add	<u>SV</u> <u>Sall</u>	ly Smith	
Type of Action	Title	Name	Address
(Check One)	T	RICHARD JAN PARES	11 DODONIA GARDENS
Change X Add			CITY BEACH, OC
Adu Remove			WESTERN AUSTRALIA 6015 A
2) Change			
Add			
Remove 3 ) Change			
Add			
Remove			<del></del>
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific)	
	_
	<del>-, -</del>
<u> </u>	
<del></del>	<del></del>
<del></del>	
	(**
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:	<u>-</u>
(if not applicable, indicate N/A)	Ę
•	
	٢
·	-

	t(s) adoption:, if other than the
date this document was signed	
Effective date if applicable:	OCTOBER 19, 2023
The same in approxime.	(no more than 90 days after amendment file date)
Note: If the date inserted in document's effective date on t	this block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
☐ The amendment(s) was/we action was not required.	ere adopted by the incorporators, or board of directors without shareholder action and shareholder
	ere adopted by the shareholders. The number of votes cast for the amendment(s) vere sufficient for approval.
"The number of vote	es cast for the amendment(s) was/were sufficient for approval
<i>u</i> y	(voting group)
OCT	OBER 19, 2023
Dated	——————————————————————————————————————
	By a director, president or other officer – if directors or officers have not been
Signature	
(† Si	elected, by an incorporator – if in the hands of a receiver, trustee, or other court
(† Si	
(† Si	elected, by an incorporator – if in the hands of a receiver, trustee, or other court ppointed fiduciary by that fiduciary)
(† Si	elected, by an incorporator – if in the hands of a receiver, trustee, or other court ppointed fiduciary by that fiduciary)
(† Si	elected, by an incorporator – if in the hands of a receiver, trustee, or other court ppointed fiduciary by that fiduciary)