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Amend Name Chy

> DEC 21 2016 ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: MediLeaf Rx Inc		
DOCUMENT NUMI			
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Alison Scutte		
	-	Name of Contact Person	n
		Firm/ Company	
	10 Foxfire Lane	,	
		Address	
	Oldsmar, FL 34677		
		City/ State and Zip Cod	e
alisor	@currentglass.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
Alison Scutte		at (de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
□ \$35 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)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as curren	tly filed with the Flo	orida Dept. of State)	
P16000097432			
(Document Number	of Corporation (if kno	own)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corp	poration adopts the following	g amendment(s) to
A. If amending name, enter the new name of the corporation:			
Current Glass Company			The new
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A profession	r "incorporated" or the ab al corporation name must c	breviation
B. Enter new principal office address, if applicable:	NA		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		المحدد ما المحدد الم	20
	 	1 1 m m m	
C. Enter new mailing address, if applicable:	NA		<u>o</u> !"
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)			
)** (;) *****	
			ဝ
D. If amending the registered agent and/or registered office add	duese in Florida, ente	and the name of the	
new registered agent and/or the new registered office address		er the name of the	
Name of New Registered Agent			
(Florida s	treet address)		
New Registered Office Address:		. Florida	
New Registered Office Address.	(City)	, Florida(Zip C	Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar		obligations of the position.	

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.

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>	Name	<u>Addres</u> s
1) X Change	D	Alison Scutte	NA
Add			
Remove			
2) X Change	<u>D</u>	Maxwell Plumer	NA
Add			
Remove			***
3) Change	D	Alfred Scutte III	10 Foxfire Lane
X Add			Oldsmar, FL 34677
Remove			
4) Change		<u> </u>	·
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add		-	
Remove			

E. If amending or adding additional Artic (Attach additional sheets, if necessary).	
NA	(be specific)
V- V	<i>J</i>
F. If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
(if not applicable, indicate N/A)	ioment a not contained in the amendment asen.
The current 50/50 owners Alison and Max,	have elected to add Alfred Scutte III as a director and equal shareholder.
As such, the previous 100 shares of \$0 par v	value common stock is withdrawn. In it's place, we elect to issue 150 shares
of \$0 par value common stock. Stock to be	distributed equally as 50 shares to each to Alison, Max and Alfred.

· •	12/10/2016	
The date of each amendment(s) adoption:	, if other than th
date this document was signed.		
	2/13/2016	
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 date with Department of State's records.	ill not be listed as th
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) e sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
12/13/20 Dated	016	
<u></u>	Elesn Datt	
(Ву	a director, president or other officer - if directors or officers have not been	
	cted, by an incorporator - if in the hands of a receiver, trustee, or other court	
app	ointed fiduciary by that fiduciary)	
	Alison Scutte	
	(Typed or printed name of person signing)	
	CFO/Director	
	(Title of person signing)	