P17000022629

(R	(equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	City/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL.
(E	Business Entity Nan	ne)
(C	Ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	o Filing Officer:	

Office Use Only



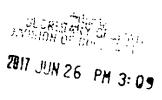
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COVER LETTER



TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	DRATION: Hemplucid Distro	Co.		
	1BER: P17000022629.			
The enclosed Article	s of Amendment and fee are su	bmitted for filing.		
Please return all corr	espondence concerning this mat	tter to the following:		
	Stuart Zuckerman			
		Name of Contact Perso	n	
	Global Corporate Services, In	HC.		
		Firm/ Company	·	
	7920 Royal Lace Terrace Lak	(e		
		Address		
	Lake Worth, FL 33467			
		City/ State and Zip Cod	le	
tus 6	<u>₿</u> delawarecorp.net			
	=	ed for future annual report	notification	
	trimar address. (to be us	ed for fatare aimaar report	notine ation)	
for further informati	on concerning this matter, pleas	e call:		
Stuart Zuckerman		at (561	968-6611	
Name of Contact Person		Area Co	ode & Daytime Telephone Number	
Inclosed is a check f	or the following amount made p	payable to the Florida Dep	artment of State:	
☐ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
	niling Address		Address	
Amendment Section		Amendment Section		
Division of Corporations P.O. Box 6327		Division of Corporations Clitton Building		

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



Hemplucid Distro Co.

2017 JUN 26 PM 3: 10

to

The new or "incorporated" or the abbreviation scional corporate Blvd F1, 33431
or "incorporated" or the abbreviation sional corporation name must contain the orporate Blvd
or "incorporated" or the abbreviation sional corporation name must contain the orporate Blvd
or "incorporated" or the abbreviation sional corporation name must contain the orporate Blvd
F1, 33431
FI. 33431
enter the name of the

, Florida
(Zip Code)
he obligations of the position.

Signature of New Registered Agent, if changing

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 Remove Y Mike Jones X Add SY Sally Smith	Example: X Change	PT	John Doe	
Type of Action (Check One) Title (Check One) Name Address 11	X Remove	<u>V</u>	Mike Jones	
Check One P.D Scott Frohman 2300 NW Corporate Blvd Suite 110 Boca Ration, FL 33451 Boca Ra	X Add	<u>sv</u>	Sally Smith	
Add		<u>Title</u>	<u>Name</u>	Address
	1) X Change	P,D	Scott Frohman	2300 NW Corporate Blvd Suite 11
21 Change Add				Boca Raton, FL 33431
Add	Remove			
	2) Change			
3) Change	Add			
	Remove			
Remove	3) Change		_	
4) Change	Add			
Add	Remove			
Remove	4) Change		_	
5) Change	Add			
Add	Remove			
Remove	5) Change			
6)Change	Add			
Add	Remove			
Add	6) Change			
			<u> </u>	

Attach <i>additional sheets,</i>	if necessary). (B	<mark>, enter change(s</mark>) Be specific)	<u></u>		
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f an amendment provid	ar fan an ar ahana	a maalaesifiaatia	n ar annoullation	s of icenal chorac	
provisions for implemen	iting the amendm	ent if not contai	ned in the amend	Iment itself:	1
(if not applicable, in	dicate N/A)				
			, .		
			_		
		·			

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements document's effective date on the Department of State's records.	s, this date will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
■ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the ame by the shareholders was/were sufficient for approval.	ndment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	nareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareh action was not required.	older
March 15, 2017 Dated	
Signature (By a director, president or other officer – if directors or officers have a selected, by an incorporator – if in the hands of a receiver, trustee, or of appointed fiduciary by that fiduciary)	
March D. Steway	
(Typed or printed name of person signing)	
Incorporator	

(Title of person signing)