## P18000060859

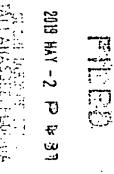
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPOR	Greenostic Canna	bis, Corp	
DOCUMENT NUMB	P18000060859		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	Wanda Smith		
		Name of Contact Person	n
	17906 Woxdcrest Way	Firm/ Company	
•	Clermont, FL 34714	Address	
		City/ State and Zip Cod	e
office	e@greenosticmedical.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Natalia Rivera Smith		4()7 at (	861-6434
Name o	of Contact Person		de & Daytime Telephone Number
Enclosed is a check for	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	ling Address ndment Section sion of Corporations	Amend	Address Iment Section on of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Greenostic Cannabis, Corp



of Corporation (if known) 11 571 For Visit Visit Control of MALE AFASSEE, FLUX.CA (s. Florida Profit Corporation adopts the following amendment(s)
The new on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."
dress in Florida, enter the name of the
reet address)
, Florida
(City) (Zip Code)
t: with and accept the 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.

Example: X Change	<u>PT</u>	John Doc	
X Remove	Y	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)  X  1) Change  Add Remove	Title V	Name Agustin Rivera	Address 17906 Woodcrest Way Clermont, FL 34714
2) Change Add Remove			
3 ) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add			

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f an amendmer	nt provides for an ex	vehange reclassif	fication or cancel	lation of issued sha	PDK:
provisions for	implementing the ar	<u>mendment if not (</u>	contained in the a	mendment itself:	1 40/1
	icable, indicate N/A)	i			
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The date of each amendment(s) adoption:	, if other than t
date this document was signed.	
Effective date if applicable: (no more than 90 days after amendment file date)	
(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date vidocument's effective date on the Department of State's records.	will not be listed as t
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"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.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
April 25, 2019	
Dated ·	
Signature / CC	
(By a director, president or other officer – if directors or officers have not been	
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Natalia Rivera Smith	
(Typed or printed name of person signing)	
Incorporator/ Director	
(Title of person signing)	