# P18000062111

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#### COVER LETTER

TO: Amendment Section Division of Corporations

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## NAME OF CORPORATION: ZERO GRAVITY SCIENCES, INC.

DOCUMENT NUMBER: P18000062111

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

DAVID POLLOCK

Name of Contact Person

ZERO GRAVITY SCIENCES, INC.

Firm/ Company

325 SW 15TH AVENUE

Address

POMPANO BEACH, FL 33069

City/ State and Zip Code

DAVID@BRANDLABSUSA.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

 DAVID POLLOCK
 at (<sup>954</sup>)
 532-5390

 Name of Contact Person
 Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

🗐 - \$35 Filing Fee

□S43.75 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)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address</u> Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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Articles of Amendment to Articles of Incorporation of



2021 MAY 26 PM 14:51

ZERO GRAVITY SCIENCES, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P18000062111

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation;

### A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "lnc.," or Co.," or the designation "Corp.," "lnc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

#### B. <u>Enter new principal office address</u>, if applicable: (Principal office address <u>MUST</u> BE A STREET ADDRESS)

- C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>)
- D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent	DAVID POLLOCK	
	325 SW 15TH AVENUE	
	(Florido street address)	
<u>New Registered Office Address:</u>	POMPANO BEACH	, Florida 33069
	(City)	(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

(D)

Signature of New Registered Agent, 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)

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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 = Trustec; 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, SF as an Add. **Example:** 

<u>X</u> Change	<u>PT</u>	John Doe	
X Remove	$\underline{V}$	Mike Jones	
<u>X</u> Add	<u>SV</u>	Sally Smith	
<u>Type of Action</u> (Check One)	<u>Title</u>	Name	Address
1) Change	VPD	SCIMECA, CHARLES	325 SW 15TH AVENUE
Add			POMPANO BEACH, FL 33069
X Remove			
2) Change			
Add			
Remove 3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary).	(Be specific)
If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,

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*(if not applicable, indicate N/A)* 

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late this document was signed	
Effective date <u>if applicable</u> :	November 17, 2020
	(no more than 90 days after amendment file date)
	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.	re adopted by the incorporators, or board of directors without shareholder action and shareholder
	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	re approved by the shareholders through voting groups. The following statement a for each voting group entitled to vote separately on the amendment(s):
"The number of vote:	s cast for the amendment(s) was/were sufficient for approval
by	····
	(voting group)
Signature (H so	5/17/2021 By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court opointed fiduciary by that fiduciary)
	DAVID POLLOCK
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)