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COVER LETTER

TO: Amendment Section **Division of Corporations** NAME OF CORPORATION: Pirani Life, Inc DOCUMENT NUMBER: P18000064920 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Brandegee Pierce Name of Contact Person Pirani Life, Inc Firm/ Company 1421 NE 55th Street Address Fort Lauderdale, FL 33334 City/ State and Zip Code brandegee@pirani.life E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (561) 929-4211

Area Code & Daytime Telephone Number Danielle Del Sordo Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: **\$35** Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed)

Mailing Address

Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section **Division of Corporations** The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

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Pirani Life, Inc	>
(Name of Corporat	ion as currently filed with the Florida Dept. of State)
P18000064920	
(Decu	ment Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation:	da Statutes, this Florida Profit Corporation adopts the following am
A. If amending name, enter the new name of the c	corporation:
	Th
name must be distinguishable and contain the word "c". "Inc.," or Co.," or the designation "Corp," "Inc, "chartered," "professional association," or the abbr	corporation," "company," or "incorporated" or the abbreviation "C," or "Co". A professional corporation name must contain the eviation "P.A."
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	OV)
(Framing dauress MAT BEAT OF THE BE	<u></u>
	
D. If amending the registered agent and/or registe	ered office address in Florida, enter the name of the
new registered agent and/or the new registered	office address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code,
New Registered Agent's Signature, if changing Relative I hereby accept the appointment as registered agent.	gistered Agent: I am familiar with and accept the obligations of the position.
Sign	nature of New Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and titl 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; Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each 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 a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones +	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add		-	
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Pemove			

E. If amending or adding additional Articles, enter change(s) here:	
(Attach additional sheets, if necessary). (Be specific)	
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F. 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:	
(if not applicable, indicate N/A)	
Danielle Del Sordo - 51% Owner (5100)	
Brandegee Pierce - 49% Owner (4900)	
	

4/23/2020
The date of each amendment(s) adoption:, if c date this document was signed.
4/23/2020
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, this date will not be document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareh action was not required.
■ 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"
by" (voting group)
11/2/2020
Dated
Signature (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)
appointed nadellary by that nodellary,
Reandered Pierce
(Typed or printed name of person signing)
President (Title of person signing)
(Title of person signing)