## P 180000 18219

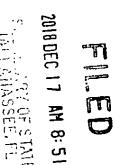
(Requestor's Name)			
(Address)			
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(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
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C. GOLDEN
DEC 2 6 2018

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Acres Agreement

NAME OF CORPO	RATION: The Honest CBD,	Inc.				
DOCUMENT NUM	BER: P18000078279					
	of Amendment and fee are su	bmitted for filing.				
Please return all corre	spondence concerning this ma	tter to the following:				
	Binyamin Levy					
	Name of Contact Person					
	The Honest CBD, Inc.					
		Firm/ Company				
	4581 Weston Road #175					
	Address					
	Weston, Florida 33331					
		City/ State and Zip Code	e			
nshaj	oiro@teamworkspecialties.com	n				
	•	sed for future annual report	notification)			
For further informatio	n concerning this matter, pleas	se call:				
Neal Shapiro		800 at (	800-223-0942			
Name	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check to	or 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)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, 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

FILED

2018 DEC 17 AM 8:51

The Honest CBD, Inc.

(Name of Corporation	as currently filed with the Florida Dept. of State) ARCH GF STATE
(Documer	nt Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida S its Articles of Incorporation:	statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corp	poration:
Honest Distributors, Inc.	The new
	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR.)	ESS )
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered new registered agent and/or the new registered of	
Name of New Registered Agent	<del></del>
	(Florida street address)
New Registered Office Address:	Florida (Zip Code)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I a	
Signati	ure 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 Change	<u>PT</u> <u>Jol</u>	hn Doe	
X Remove	<u>V</u> <u>M</u>	ke Jones	
X Add	<u>SV</u> <u>Sa</u>	lly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VT	Neal Shapiro	4581 Weston Road #175
X Add			Weston, FL 33331
Remove			
2) Change		-	
Add			<u> </u>
Remove			
3 ) Change			
Add			
Remove			
4) Change			
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5) Change	<del></del>		
Add			
Remove			· · ·
6) Change			
Add	<u></u>		
Remove			

(Be specific)
- L
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**** · · · · · · · · · · · · · · · · ·
nange, reclassification, or cancellation of issued shares,
ndment if not contained in the amendment itself:

The date of each amendment(s) ad-	option:	, if other than the
date this document was signed.		
	/2018	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date volument of State's records.	will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amendment(s). Ticient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast t	or the amendment(s) was/were sufficient for approval	
by	<del>,"</del>	
·	(voting group)	
action was not required.	bted by the board of directors without shareholder action and shareholder	
action was not required.	nted by the incorporators without shareholder action and shareholder	
12/10/2018 Dated		
Signature	Beny-	
(By a di selected	rector, president or other officer – if directors or officers have not been , by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	Binyamin Levy	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	