## P18000083928

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



600438675836

10/29/24--01012--018 \*\*06.00

SECRETARY OF STATE
TALLAHASSEE, FL



## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: GREENPHARMA LABS INC				
	BER: P18000083928				
The enclosed Article	s of Amendment and fee are submitted for filing.				
Please return all corre	espondence concerning this matter to the following:				
	FELIPE BARRIOS				
	Name of Contact Person				
	CHEMCO				
	Firm/ Company				
	4920 NW 165 STREET				
	Address				
	MIAMI, FLORIDA 33014				
	City/ State and Zip Code				
	felipe@echemco.com				
	E-mail address: (to be used for future annual report notification)				
For further informati	on concerning this matter, please call:				
FELIPE BARRIOS	at ( 786) 858-2977				
Name of Contact Person Area Code & Daytime Telephone					
Enclosed is a check	for the following amount made payable to the Florida Department of State:				
<b>\$35</b> Filing Fee	☐\$43.75 Filing Fee & ☐\$43.75 Filing Fee & ☐\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status				

Certified Copy (Additional copy 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

Certified Copy

(Additional Copy is enclosed)

## Articles of Amendment Articles of Incorporation οť

(Name of Corporation as curren	tle filed with the Florida De	ent of State)	<del></del>
P18000083928	try theu with the Florida De	pr. of State	
	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation	adopts the follow	ving amendment(s)
A. If amending name, enter the new name of the corporation:			
			The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A	A professional corporation	l" or the abbrevia name must con	ation "Corp"
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )		•	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
D. If amending the registered agent and/or registered office adnew registered agent and/or the new registered office address		name of the	2024 OCT 29 PK 12: 3 SECRETARY OF STATE TALLAHASSEE, FL
			_883 PP
(Florida	street address)	<del></del>	H 2 
New Registered Office Address:		Florida	- FAT - 3;
New Registered Office radiess.	(City)	(2	Lip Code)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia  Signature of New	nt: r with and accept the obligati Registered Agent, if changin		)II. 
Check if anniouble			

☐ 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)

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>	John Doe	
X Remove	$\underline{V}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	V	ALEJANDRO MENESES	5255 NW 165 STREET
X Add			MIAMI, FLORIDA 33014
Remove			<del></del>
2) Change	V ——–	KEVIN TORRES	5255 NW 165 STREET
X Add			MIAMI, FLORIDA 33014
Remove 3 ) Change			
Add			SECRETARY TALLAHA
Remove			DCT NET
4) Change		_	29
Add			PMI2:
Remove			2: 38 
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific)	
	<u> </u>
	<del></del>
	***
	ALI
	A A
f an amendment provides for an exchange, reclassification, or cancellation of issued shares,	AS AS
provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)	)         
	L S
<del></del>	<del>- ₽3</del>
	<u>—</u> -

	OCTOBER 23, 2024	
The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this epartment of State's records.	date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ac action was not required.	opted by the incorporators, or board of directors without shareholder a	action and shareholder
☐ The amendment(s) was/were ac by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment ufficient for approval.	ent(s)
	proved by the shareholders through voting groups. The following state reach voting group entitled to vote separately on the amendment(s):	'ement
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
<b>b</b> y	(voting group)	
select	director, president or other officer – if directors or officers have not be ed, by an incorporator – if in the hands of a receiver, trustee, or other ented fiduciary by that fiduciary)	
	EITELBERG MONTARROYOS	CT 2
	(Typed or printed name of person signing)	ASS
	OWNER / CEO	PHI2: SSEEFF
	(Title of person signing)	2: 38 FL