P190000 16384

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	ON: PBF Nu	trition Inc.		
DOCUMENT NUMBER:	P19000016	384		
The enclosed Articles of Art	nendment and fee are su	bmitted for filing.		
Please return all correspond	ence concerning this ma	tter to the following:		
	Vanessa Hauta S	Palmer Name of Contact Person	1	
	naure C	rience Inc. Firm/Company		
	220 NW 2	5 th C+		
	Pompano Beach, FL 33064 City/ State and Zip Code			
For further information cond		Ecleanmachine ed for future annual report	mine . com notification)	
Vanessa	Palmer	at (954)304-2522 de & Daytime Telephone Number	
Name of Cor	ntact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department of State:				
S35 Filing Fee [☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

of

PBF Nutrition Inc	
	filed with the Florida Dept. of State)
P190000 16385	
	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	N/AThe new
name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word
B. Enter new principal office address, if applicable:	NIA
(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)	220 NW 25th Ct
	Pompano Beach FL 33064
D. If amending the registered agent and/or registered office address: Name of New Registered Agent N/A	
(Florida stre	vet address)
New Registered Office Address:	(City) , Florida (Zip Code)
	Chy) (2.1) Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	
	N/A
Signature of New Re	gistered 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)

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>	<u>John Doe</u>	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	_1	Guidry, Robert	4006 Hudson Avenue
Add		-	Tampa FL 33618
X Remove			
2) X Change	7	Palmer Vanessa	200 NW 25th Ct
Add			Rompano Brach FL 3306
Remove 3) Change			
Add			
Remove			
4) Change	<u></u>		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	~/a
<u> </u>	
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	707.1107
4-p-	
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f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
	N/A
	

The date of each amendment(s) adoption date this document was signed.	ш: <u></u>	, our y,	,	, if other than the
Effective date <u>if applicable</u> :		N/A	mendment file date)	
	(no more that	n 90 days after a	mendment file date)	
Note: If the date inserted in this block d document's effective date on the Department			y filing requirements,	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were adopted b action was not required.	y the incorporators, (or board of direc	tors without sharehole	der action and shareholder
☐ The amendment(s) was/were adopted b by the shareholders was/were sufficien		The number of v	otes east for the amer	ndment(s)
☐ The amendment(s) was/were approved must be separately provided for each v				
"The number of votes cast for the	amendment(s) was/	were sufficient f	or approval	
by				
DatedU / 4	12024			
Signature)		
(By a director, selected, by a	, president or other o	the hands of a r	ors or officers have no ecciver, trustee, or oth	
	Vanessa F	Palmer	on signing)	
	(Typed or printe	ed name of perso	on signing)	
	Vice Presi	iden+		
	(Title of person			