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(Red	questor's Name)	
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(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: GREENLYST INC. P19000035250 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: MIKE PASLEY
Name of Contact Person IDEA NEST LLC
Firm/ Company 514 N. FRANKLIN ST. #206

Address

TAMPA, FL 33607

City/ State and Zip Code MIKE Q GREENLYST, APP E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (518) 878-3464 Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: ≤\$52.50 Filing Fee □ \$35 Filing Fee □\$43.75 Filing Fee & **□\$**43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

> 2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment

	to
Articles of	Incorporation
	of
1	

(Name of Corporation as currently filed wit	h the Florida Dan	et of State)	
(Name of Corporation as currently fried wit	n the Florida Dep	it. or state)	
(Document Number of Corporati	ion (if known)		
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida Pr</i>	rolit Corneration o	donte the following	v namanalavant(a)
its Articles of Incorporation:	oja Corporadon a	dopas are ronowing	; amendmenu(s)
A. If amending name, enter the new name of the corporation:			
			The new
name must be distinguishable and contain the word "corporation," "comp" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A poword "chartered," "professional association," or the abbreviation "P.A."	oany," or "incorpo rofessional corpor	orated" or the ab ation name must c	breviation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)			
	<u> </u>	(F.	
	 · .	A C	. <u>~</u> = ====
C. Enter new mailing address, if applicable:	•		ω ₅₃₅₂
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	· · · ·	<u> </u>	<u> </u>
		S:	
		mi	ب
D. If amending the registered agent and/or registered office address in Flor new registered agent and/or the new registered office address:	rida, enter the nar	ne of the	. •
Name of New Registered Agent 10EA NEST LLC			
514 N. FRANKLIN (Florida street address)		06	
New Registered Office Address:	'	Florida 334	09
(City)		Zip C	ode)
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent. I am familiar with and ac	xept the obligation	s of the position.	
	_/		
Signature of New Registered	Gent, 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.

Example: X Change	PT John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
<u>X</u> Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) X Change	P I DEAN EST CORP	514 N. FRANKZIN
Add	CURRENTLY IDEA NEST CORP IS LISTED AS P BUT THIS SHOW D BE	¥ 206
Remove	CHANGED TO IDEA NEST LLC	TAMPA, F1 33609
2) Change		
Add		
Remove		
3) Change		
Add		
Remove		
4) Change		
Add		
Remove		<u></u>
5)Change		
Add		
Remove		
6)Change		
Add		
Remove		

Attach additional shee	ets, if necessary).	(Be specific)				
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		•		-		
an amendment proprovisions for imple	menting the ame	nange, reclassifi ndment if not c	cation, or cancel ontained in the a	lation of issued s mendment itself	shares,	
(if not applicable	, indicate N/A)					
				 		
	<u> </u>					
		 				
				·· · · · · · · · · · · · · · · · · ·		

The date of each amendment(s) addate this document was signed.	doption:	_, if other than th
Effective date if applicable:		
enterve date <u>it appretante</u> .	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirements, this date will epartment of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes east for the amendment(s) ifficient for approval.	
The amendment(s) was/were app must be separately provided for	proved 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	for the amendment(s) was/were sufficient for approval	
, ,	(voting group)	
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder	
and the second s	opted by the incorporators without shareholder action and shareholder	
Dated 7 /	26/2019 MM	
Signature		
(Dy a d selecte	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
	(Title of person signing)	