P19000093198

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
 		





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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: BOTANICA VITE	TI CONGO 7 RAYOS INC	· ·		
DOCUMENT NUM	BER: P19000093198		· · · · · · · · · · · · · · · · · · ·		
	s of Amendment and fee are su	bmitted for filing.			
Please return all corr	espondence concerning this ma	itter to the following:			
	MADELINE JIMENEZ				
	Name of Contact Person				
		Firm/ Company			
	5999 DUNDEE RD SUITE 6	550			
		Address			
	WINTER HAVEN, FL. 3388	34			
		City/ State and Zip Cod	С		
For further information	on concerning this matter, plea	sed for future annual report se call:at (at			
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check t	or the following amount made	payable to the Florida Depa	artment of State:		
\$35 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 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, Ft. 32303

Articles of Amendment

to
Articles of Incorporation of

FILED

Botanica Vititi Coi	140 7 2020 OCT 267 AM 11: 36
	tly filed with the Florida Dept. of State)
P 19 0000 93 198	TALL ATTACK STATE
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this ts Articles of Incorporation:	Florida Profit Corporation adopts the following 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 name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	5999 Dundec Rd. Suite 650
	5999 Dundee Rd. Suite 650 Winter Haven FL 33884
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	
Name of New Registered Agent Made line	Jimenez
5999) y 1	ndee Rd. Suite 650 treet address)
New Registered Office Address: Winter H	
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar Market Signature of Vew R	with and accept the obligations of the position.
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	PT John	<u>1 Doe</u>	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	\mathcal{P}	Juan Burgos	5170 Timberlane P.
Add			Lake Wales, FL. 33898
X Remove			
2) Change	VP	Dileia Bulgos	5170 Timberlane Rd
Add			Lake Wales, FL. 33898
X Remove 3) Change	_ρ	Madeline Jimenez	5999 Dundee Rd.
X Add			Suite 650
Remove			Winter Haven, FL. 33885
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

г.	If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
	(Milach daditional sheets, if necessary). (De specific)
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)
	(if not applicable, indicate N/A)
_	

The date of each amendment(s) adoption:	Defober	09	رروزاء	if other than the
date this document was signed.				
Effective date <u>if applicable</u> :	October o more than 90 days	09	2020	
(ne	o more than 90 days o	ifter amend	ment file date)	
Note: If the date inserted in this block does not n document's effective date on the Department of Sta		atutory filin	ig requirements, this	date will not be listed as the
Adoption of Amendment(s) (CHEC	K ONE)			
☑ The amendment(s) was/were adopted by the inco- action was not required.	orporators, or board o	f directors v	without shareholder ac	ction and shareholder
☐ The amendment(s) was/were adopted by the share by the shareholders was/were sufficient for appr		er of votes o	east for the amendmen	nt(s)
☐ The amendment(s) was/were approved by the shi must be separately provided for each voting gro				ment
"The number of votes cast for the amendm	nent(s) was/were suffi	cient for ap	proval	
by	group)		.,,	
Signature (By a director, president selected, by an incurpor appointed fiduciary by	rator—if in the hands	directors or of a receiv	officers have not bee er, trustee, or other co	en ourt
.,	<u>Kan Burgos</u> ned or printed name o	f person sig	ning)	
(Titl	President le of person signing)			