## P190000 93209

| (Requestor's Name)                      |
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| PICK-UP WAIT MAIL                       |
|   |
| (Business Entity Name)                  |
| (Document Number)                       |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPO           | RATION: CULTURE SUPPE   | Y OF SOUTH FLORIDA   | CORP  |
|-------------------------|---|--|---|
|                         | BER: P19000093209   |  |   |
| The enclosed Articles   | of Amendment and fee are su   | bmitted for filing.  |   |
| Please return all corre | spondence concerning this ma  | tter to the following:   |   |
|                         | MATTHEW RODRIGUEZ   |  |   |
|                         |   | Name of Contact Persor   | 1   |
|                         | CULTURE SUPPLY OF SOUTH FLORIDA CORP  |  |   |
|                         |   | Firm/ Company  |   |
|                         | 1635 WEST 44 PL #508  |  |   |
|                         |   | Address  |   |
|                         | HIALEAH, FL 33012   |  |   |
|                         |   | City/ State and Zip Code   | <i>(</i> *  |
| DAR                     | RANH41@GMAIL.COM  |  |   |
|                         | -   | sed for future annual report                                       | notification)   |
|                         |   | ,  | ,   |
| For further informatic  | n concerning this matter, pleas   | se call:   |   |
| DARRANI RODRIG          | UEZ   | at ( 305   | 3976552   |
| Name of Contact Person  |   | Area Co  | de & Daytime Telephone Number   |
| Unclosed is a check to  | or the following amount made  | payable to the Florida Depa  | artment of State:   |
| S35 Filing Fee          | □\$43.75 Filing Fee &<br>Certificate of Status                              | □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)                      |
| Am<br>Div<br>P.O        | endment Section<br>ision of Corporations<br>. Box 6327<br>ahassee, FL 32314 | Amend<br>Division<br>The Co<br>2415 ?                              | Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303 |

## Articles of Amendment to Articles of Incorporation of

| (Name of Corporation a  | s currently filed with the Florida Dept. of State)   |
|---|--|
| CULTURE SUPPLY OF SOUTH FLORIDA CORP  |  |
| (Document   | Number of Corporation (if known)   |
| Pursuant to the provisions of section 607,1006, Florida Staits Articles of Incorporation:                       | tutes, this ${\it Florida\ Profit\ Corporation}$ adopts the following amendment(s) to  |
| A. If amending name, enter the new name of the corpo  | pration:   |
|   | The new  |
|   | oration," "company," or "incorporated" or the abbreviation "Corp.," "Co". A professional corporation name must contain the word ion "P.A." |
| B. Enter new principal office address, if applicable:   |  |
| (Principal office address <u>MUST BE A STREET ADDRE</u>   | <u>ss</u> )  |
|   |  |
|   |  |
| C. Enter new mailing address, if applicable:  | 38 FE  |
| (Mailing address <u>MAY BE A POST OFFICE BOX</u> )  |  |
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| Note that the latest the second   | 77   |
| D. If amending the registered agent and/or registered enew registered agent and/or the new registered office.   |  |
| Name of New Registered Agent  |  |
| Numery is a registrate seem   |  |
| <del></del>   | (Florida street address)   |
|   |  |
| Now Registered Office Address:  |  |
|   | •  |
|   |  |
| New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I an |  |
| т петену иссерт те арронитен из гедіміства идені. Т ип  | н затишт with and ассерт те obugations от те розиюн.   |
|   |  |
|   |  |
| Signatur  | e 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.

| Francisco                     | e, ana sai      | ay Smun, SV as an Add, |                                       |
|-------------------------------|-----------------|------------------------|---------------------------------------|
| Example: 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)    | <u>Title</u>    | <u>Name</u>            | Address                               |
| 1) Change                     | <u>S</u>        | DARRANI RODRIGUEZ      | 1635 WEST 44 PL                       |
| ${\color{red} {f X}}_{f Add}$ |                 |                        | APT, 508                              |
| Remove                        |                 |                        | HIALEAH, FL 33012                     |
| 2) Change                     |                 |                        |                                       |
| Add                           |                 |                        |                                       |
| Remove 3 ) Remove             |                 |                        |                                       |
| Add                           |                 |                        |                                       |
| Remove                        |                 |                        |                                       |
| 4) Change                     |                 |                        | · · · · · · · · · · · · · · · · · · · |
| Add                           |                 |                        |                                       |
| Remove                        |                 |                        |                                       |
| 5) Change                     |                 |                        |                                       |
| Add                           |                 |                        |                                       |
| Remove                        |                 |                        |                                       |
| 6) Change                     |                 |                        |                                       |
| Add                           |                 |                        |                                       |
| Remove                        |                 |                        |                                       |
|                               |                 | Page 2 of 4            |                                       |

| F., | <u>If amending o</u> | <u>r adding a</u> | <u>addi</u> tional Ar | ticles, enter | change(s) here: |
|-----|----------------------|-------------------|-----------------------|---------------|-----------------|
|-----|----------------------|-------------------|-----------------------|---------------|-----------------|

(Attach additional sheets, if necessary). (Be specific)

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| <u>provisions for implement</u><br>(if not applicable, indi | ng the amendment if not contained in the amendment rate N/A) | <u>itself:</u>                         |
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|   | Page 3 of 4  |  |
| The date of each amendment                                  | s) adoption: December 20/ 2019                               | , if other than the                    |
| date this document was signed.                              |  |  |
| Effective date <u>if applicable</u> :                       | December 20, 2019  |  |
| <del></del> -   | (no more than 90 days after amendment                        | t file date)                           |

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

| Adoption of Amendment(s)  | ( <u>CHECK ONE</u> )   |   |
|---|--|---|
| ☐ The amendment(s) was/were adopt<br>by the shareholders was/were suffi |  | r of votes cast for the amendment(s)                                      |
|   | ved by the shareholders through vot<br>ch voting group entitled to vote sepa                                       | ing groups. The following statement arately on the amendment(s):          |
| "The number of votes east fo  | the amendment(s) was/were suffic   | ient for approval   |
| by  | (voting group)   | ·   |
|   | (voting group)   |   |
| ☐ The amendment(s) was/were adopt action was not required.              | ed by the board of directors without   | shareholder action and shareholder  |
| The amendment(s) was/were adopt action was not required.                | ed by the incorporators without shar   | reholder action and shareholder   |
| selected,   | ctor, president or other officer – if d<br>by an incorporator – if in the hands of<br>fiduciary by that fiduciary) | irectors or officers have not been of a receiver, trustee, or other court |
| <u> </u>  | Pariani Podria<br>(Typed or printed name or<br>Vice resident<br>itle of person signing)                            | ) UE Z<br>person signing)   |