5/21/2020 Florida Department of State

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : SORSHER & ASSOCIATES, LLC.

Account Number : 120170000056

Phone : (954)842-2931

Fax Number : (954)842-2936

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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COR AMND/RESTATE/CORRECT OR O/D RESIGN DEEPSTER LABEL INC

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May 22, 2020



FLORIDA DEPARTMENT OF STATE Division of Corporations

DEEPSTER LABEL INC 1317 EDGEWATER DR #526 ORLANDO, FL 32804

SUBJECT: DEEPSTER LABEL INC

REF: P20000026851

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please specify if our office is adding, removing or changing the Officer/Director details.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Terri J Schroeder Regulatory Specialist III

FAX Aud. #: H20000151333 Letter Number: 420A00010335 TO: Amendment Section

COVER LETTER

Division of Corpo	rations		
NAME OF CORPOR	ATION: DEEPSTER LAB	EL INC	
DOCUMENT NUMBI			·
The cholosed Articles o	f Amendment and fee are si	ubmitted for filing,	
Please return all corresp	ondence concerning this ma	atter to the following:	
;	CUSHKO, ALIAKSEI		
I	DEEPSTER LABEL INC	Name of Contact Perso	n.
9	00 N FEDERAL HWY, ST	Firm/ Company E 306	
- 1	IALLANDALE, FL 33009	Address	7.7
-		City/ State and Zip Cod	<u></u>
e	słgm1992@gmail.com		
_	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, plea	se call:	
KUSHKO, ALIAKSEI		at (954	842-2931
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for t	he following amount made	payable to the Florida Dep	urtment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fcc & Certificate of Status	□\$43.75 Filing Fce & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ameno Divisio P.O. B	ng Address Iment Section on of Corporations ox 6327 assee, FL 32314	Amend Divisio The Co	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Articles of Amendment Articles of Incorporation of

DEEPSTER LABEL INC			
(Name P20000026851	of Corporation as curren	tly filed with the Florida Dept. of State)	
. 2,	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:		s Florida Profli Corporation adopts the following	ng amendment(s) to
A. If amending name, enter the new n	nme of the corporation:		
name must be distinguishable and contain "Inc.," or Co.," or the designation "Chartered," "professional association,"	Corp," "Inc." or "Co".	"company," or "Incorporated" or the abbreviati A professional corporation name must conta	_The new on"Corp.," In the word
B. Enter new principal office address,	If applicable:	900 N FEDERAL HWY, STE 306	
(Principal office address MUST BE A S		HALLAMDALE, FL 33009	
C. Enter new mailing address, if appl (Mailing address MAY BE A POST	icable; OFFICE BOX)	900 N FEDERAL HWY, STE 306	\ -
		HALLANDALE, FL 33009	
D. If amending the registered agent an new registered agent and/or the new Name of New Registered Agent	nd/or registered office add w registered office addres KUSIIKO, ALIAKSEI	dress in Florida, enter the name of the	
Hante of their Registered Agent	900 N FEDERAL HWY,	STE 306	-
		treet address)	-
New Registered Office Address:	HALLANDALE	, Florida 33009	
		(City) (Zip)	Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Agen ered agent. I am familiar	t: with and accept the obligations of the position.	2021 HAY
	Aliaksri Kus	hko	2
	Signature of New I	Registered Agent, if changing	· 24
Check if applicable The aman/ment/s) is/are being filed to	UPPLIANT TO C 607 0120 (11)	(A) K C	ري

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 & Change. 123 HAY 22 AH Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:		•	
X_Change	<u>PT</u>	John Doc	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	**
Type of Action (Check One)	Title	<u>Name</u>	Address
l) 🔀 Change		KUSHKO, ALIAKSEI	900 N FEDERAL HWY, STE 306
Add			HALLANDALE, Fl. 33009
Remove			
2) X Change		KUSHKO, ALIAKSEI	900 N FEDERAL HWY, STE 306
Add			HALLANDALE, FL 33009
Remove 3) X Change		KUSHKO, ALJAKSEI	900 N FEDERAL HWY, STE 306
			HAULANDALE, FL 33009
Remove			N
4) Change			
Add			
Remove			
5) Change	—		<u> </u>
Add			
Remove			
6) Change		<u> </u>	
Add			
Remove			-

amending or adding additional Art ttach additional sheets, if necessary).	(Be specific)	
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		• .
		•
on amendment provides for an exch	ange, reclassification, or cancellation of issued sha	ıreş,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:	:
(9 ···· ·pp···, maione ·····)		,
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The date of each amendment(side this document was signed.) Aduption:	, if other than
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory fifing requirements, this date will Department of State's records.	I not be listed as
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder action and	shareholder
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.	
The amendment(s) was/were must be separately provided	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by		29 22 22 23 24 24
	(voling group)	(_) (2) (2) (2) (3) (3) (3) (3) (3) (3) (3) (3) (3) (3
05/21/20	20	
		. 6
Signature	Aliaksri Kushko	<u> </u>
selec	director, president or other officer – if directors or officers have not been sted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	KUSHKO, ALIAKSEI	
	(Typed or printed name of person signing)	
	CEO	
	(Title of person signing)	