

P21000012686

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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MAIL

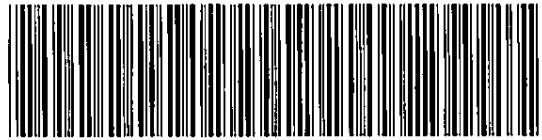
(Business Entity Name)

(Document Number)

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**STEVEN J. ASARCH, P.A.**

Law Offices

Steven J. Asarch, J.D., LL.M.

*Board Certified Wills, Trusts and Estates Lawyer*

Admitted in FL and NY

20283 State Road 7

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February 20, 2023

**VIA FEDEX**

Amendment Section

Division of Corporations

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

RE: **BRAND LABS TECHNOLOGIES, INC. - #P21000012686**

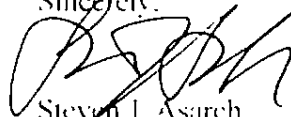
Dear Sir/Madam:

Please find enclosed for filing with the Division of Corporations Articles of Amendment to the Articles of Incorporation for the above-referenced corporation to change the name of that corporation. My firm's check #6151 in the amount of \$43.75 is enclosed for the filing fee and certified copy. An additional copy of the Articles of Amendment is also enclosed.

Please mail the filed certified copy to the undersigned in the self-addressed, stamped envelope provided herein.

Thank you for your assistance and if you should have any questions, please do not hesitate to contact me.

Sincerely,



Steven J. Asarch

Attorney at Law

SJA/

Enclosures

cc: David Pollock w/Encl. (via email)

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** Brand Labs Technologies, Inc.

**DOCUMENT NUMBER:** P21000012686

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Steven Asarch, Esq.

Name of Contact Person

Steven J. Asarch, P.A.

Firm/ Company

20283 State Road 7, Suite 400

Address

Boca Raton, FL 33498

City/ State and Zip Code

sjasarch@trustsandestateslaw.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Steven Asarch

at ( 561 ) 995-9991

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐ \$35 Filing Fee

☐ \$43.75 Filing Fee &  
Certificate of Status

☒ \$43.75 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, FL 32303

Articles of Amendment  
to  
Articles of Incorporation  
of

Brand Labs Technologies, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

P21000012686

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

Zero Gravity Agricultural Sciences, Inc.

*The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co." A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

**B. Enter new principal office address, if applicable:**  
(Principal office address MUST BE A STREET ADDRESS)

N/A

**C. Enter new mailing address, if applicable:**  
(Mailing address MAY BE A POST OFFICE BOX)

N/A

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent N/A

(Florida street address)

New Registered Office Address: N/A, Florida  
(City) (Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

\_\_\_\_\_  
Signature of New Registered 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:**

☒ Change      PT      John Doe

☐ Remove      V      Mike Jones

☒ Add      SV      Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	<u>VP D</u>	<u>Malav Trivedi</u>	<u>325 SW 15th Avenue</u>
<input checked="" type="checkbox"/> Add			<u>Pompano Beach, FL 33069</u>
<input type="checkbox"/> Remove			
2) <input checked="" type="checkbox"/> Change	<u>S D</u>	<u>Rovelyn Pollock</u>	<u>325 SW 15th Avenue</u>
<input type="checkbox"/> Add			<u>Pompano Beach, FL 33069</u>
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

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

10

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(if not applicable, indicate N/A)

N/A

The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment 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) (CHECK ONE)

- ☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- ☒ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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

by exec. + 2  
(voting group)

Dated 2/14/23

Signature

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

David Pollock

(Typed or printed name of person signing)

President

(Title of person signing)

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SEC. OF STATE