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2021 SEP -9 AM 5: 49

SECRETARY OF STATE

AND ASSECTED.

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: CBD Station Inc					
DOCUMENT NUMB	ER: P21000035575					
The enclosed Articles of	of Amendment and fee are su	abmitted for filing.				
Please return all corres	pondence concerning this ma	atter to the following:				
		Karim Lakhani				
-		Name of Contact Person	1			
		CBD Station Inc				
-	Firm/ Company					
	348 Havendale Blvd Ste 380					
-	Address					
	Auburndale, FL 33823					
		City/ State and Zip Cod	e			
		WIWINC@GMAIL.CO	M			
-	E-mail address: (to be us	sed for future annual report	•			
For further information	concerning this matter, plea	se call:				
Karim Lakhani		at (383-6000			
Name o	Contact Person		de & Daytime Telephone Number			
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:			
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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		Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810			

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED 2021 SEP -9 AM 5

CBD 20	ation inc 3 AM 5: 49
(Name of Corporation as curren	ntly filed with the Florida Dept. of State RETARY OF STARS
P21000	ntly filed with the Florida Dept. of State RETARY OF STATE O35575
(Document Number	r of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
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
3. Enter new principal office address, if applicable:	348 Havendale Blvd
Principal office address <u>MUST BE A STREET ADDRESS</u>)	Ste 380
	Auburndale, FL 33823
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
 If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre 	
Name of New Registered Agent	
(Florida)	street address)
New Registered Office Address:	(City) , Florida (Zip Code)
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Age	nt:
hereby accept the appointment as registered agent. I am familia	
Signature of New	Registered Agent, if changing
J.g 9 / 10 17	The state of the s

Check if applicable

 \Box 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	<u>PT</u>	John Do	<u>oe</u>			
X Remove	<u>V</u>	Mike Jo	ones			
X Add	<u>sv</u>	Sally Sn	nith			
Type of Action (Check One)	Title		<u>Name</u>		Address	
l) Change						
Add						
Remove						
2) Change		_				
Add						
Remove Change						
Add						
Remove						
4) Change						
Add						
Remove						
5) Change		_				
Add						
Remove						
6) Change	1 -	_				<u>-</u>
Add						
Remove						

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
,	
···	
f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	nument if not contained in the amendment usen:

The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file da	te)
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requiremed epartment of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were action was not required.	lopted by the incorporators, or board of directors without share	cholder action and shareholder
☐ The amendment(s) was/were ac by the shareholders was/were s	lopted by the shareholders. The number of votes east for the a sufficient for approval.	mendment(s)
☐ The amendment(s) was/were ap must be separately provided fo	proved by the shareholders through voting groups. The follow reach voting group entitled to vote separately on the amendm	ving statement ent(s):
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	"	
	(voting group)	
9/3/21 Dated		
6'	aulle	
selecte	director, president or other officer – if directors or officers haved, by an incorporator – if in the hands of a receiver, trustee, onted fiduciary by that fiduciary)	e not been r other court
	Karim Lakhani	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	