## P21000035635

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## COVER LETTER

**TO**: Amendment Section Division of Corporations

NAME OF CORPORATION:	YORUBA HO	LISTIC BOTANICA COR	P
DOCUMENT NUMBER:	P21000035635		
The enclosed Articles of Amena	<i>lment</i> and fee are st	ibmitted for filing.	
Please return all correspondence	econcerning this ma	tter to the following:	
	AI	LVARO HERNANDEZ	
**		Name of Contact Perso	π
		PRESIDENT	
<del></del>		Firm/ Company	
		7352 COMO DR	
<del></del>		Address	· · · · · · · · · · · · · · · · · · ·
	L 34655		
		City/ State and Zip Cod	c
For further information concerns		sed for future annual report se call:	notification)
ALVARO HERNANDEZ		786 at (	263-2548
Name of Contact Person			de & Daytime Telephone Number
Enclosed is a check for the follo	wing amount made	payable to the Florida Depa	artment of State:
	3.75 Filing Fee & citificate 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, F1, 32314		Amend Divisio The Co 2415 Y	Address Iment Section on of Corporations entre of Tallahassee S. Monroe Street, Suite 810 ussee, F1, 32303

## Articles of Amendment to Articles of Incorporation of

## YORUBA HOLISTIC BOTANICA CORP

(Name of Corporation as curre	ntly filed with the Florida Dept. of State)
P21000035635	
(Document Number	r of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, thits Articles of Incorporation:	as Florida Profit Corporation adopts the following amendments
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 " $P_{\rm eff}$	A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	7352 COMO DR
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	NEW PORT RICHEY, FL 34655
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u> )	7352 COMO DR
	NEW PORT RICHEY, FL 34655
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address Name of New Registered Agent	SSS:
(Florida :	street address
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent hereby accept the appointment as registered agent. I am familian	nt: r with and accept the obligations of the position.
	Registered Agent, if changing
Signature of New	Registered Agent, if changing
Theck if applicable	
The amendment(s) is/are being filed pursuant to s   607 0120 (14	
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	<b>№</b> Э

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 Poe 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>b.l.</u>	John Doe	
X Remove	<u>Y</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change		—	
Add			
Remove 3 ) Change			-
Add			
Remove			
4)Change			
Add			
Remove			
5) Change		<del></del>	
Add			
Remove			
5) Change			
Add			
Remove			1012

Attach additional sheets, if necessary).	i <u>cles, enter change(s) here</u> : (Be specific)
	99904466669444666644444446666
f an amandment provides for an each	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate $NA$ )	
· · · · · · · · · · · · · · · · · · ·	
· · · · · · · · · · · · · · · · · · ·	

. . .

	05/25/2021	
The date of each amendment(s) adoption:	:	if other than th
date this document was signed.		
05/25/2021		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file o	date)
	The more of the 20 days after and manier file	,
<b>Note:</b> If the date inserted in this block document's effective date on the Departmen	es not meet the applicable statutory filing requirement of State's records.	ments, this date will not be listed as the
Adoption of Amendment(s) (	(CHECK ONE)	
The amendment(s) was/were adopted by action was not required.	the incorporators, or board of directors without sh	archolder action and shareholder
☐ The amendment(s) was/were adopted by by the shareholders was/were sufficient	the shareholders. The number of votes cast for the for approval.	e amendment(s)
	y the shareholders through voting groups. The foli- ting group entitled to vote separately on the amend	
"The number of votes east for the a	nmendment(s) was/were sufficient for approval	
bv		
	(voting group)	
15-25-	- 1/	
Dated	01	
	) ' '	
Signature	· · · · · · · · · · · · · · · · · · ·	
a distriction of the state of t	resident or other officer – if directors or officers h incorporator – if in the hands of a receiver, trustee	
	ciary by that fiduciary)	, or other court
The second second		
	ALVARO A HERNANDEZ	
- V ——	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	