P210000 41214

(Requ	estor's Name)	
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SECRETARY OF STATE
TALLAHASSEE, FATE

7/9/2

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: $\underline{\hspace{1cm}}$	LANT	WELLNES	S. FWC.
name of corporation:f document number:P	210000	41214	<u>, </u>
The enclosed Articles of Amendment	and fee are submitte	d for filing.	
Please return all correspondence conce	rning this matter to	the following:	
	MIASHAHZ Nai	ED VA	SIEEN
10260	SLETP	Firm/ Company Address T 33 State and Zip Code	WAG
Buca	R ATO W City	State and Zip Code	428
E-mail add		future annual report	notification)
MAH mont BABI Name of Contact Perso	KIR	at (_5%)	1 445-8265
			-
Enclosed is a check for the following a	mount made payable	to the Florida Depa	rtment of State:
X \$35 Filing Fee ☐\$43.75 F Certificat	e of Status Ce (Ac	3.75 Filing Fee & rtified Copy Iditional copy is closed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporat P.O. Box 6327 Tallahassee, FL 3231		Divisior The Ce	Address nent Section n of Corporations ntre of Tallahassee . Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

PLANT WELLNESS, TWC-	
(Name of Corporation as currently:	
P21000041214	
P21000041214 (Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this FI its Articles of Incorporation:	
A. If amending name, enter the new name of the corporation:	
PLANET WELLNESS, Free-name must be distinguishable and contain the word "corporation," "co.	The new
name must be distinguishable and contain the word "corporation," "co. "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A p "chartered," "professional association," or the abbreviation "P.A."	npany," or "incorporated" or the abbreviation "Corp." professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	SE CRITATION TO
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	AHASSEE FL
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	
Name of New Registered Agent MIASHAHTED	YASIEEN_
Name of New Registered Agent / 0 260 SLEE (Florida stree New Registered Office Address: Bock RATE)	address)
New Registered Office Address: Boch RATON) FC, Florida 33'428
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	h and accept the obligations of the position. istered Agent, if changing
Signature of New Reg	meren agem, y enenging

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: X Change	<u>PT</u> .	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	<u>v. p</u>	RIYAZ KHAN	10260 SLEEPY BROOK WA BOCA RATEN FR 33428
Add		,	BUCA RATEN FZ 33×28
🗶 Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add		/	
Remove			

	if necessary). (Ba specific)
	
	
	
	·
an amendment provide	es for an exchange, reclassification, or cancellation of issued shares,
<u>rovisions for implemen</u>	ting the amendment if not contained in the amendment itself:
(if not applicable, ind	acate N/A)
-	
<u> </u>	
-	

entropy of the second second second

The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendmen	t file date)
Note: If the date inserted in this l document's effective date on the D	block does not meet the applicable statutory filing re epartment of State's records.	quirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without	out shareholder action and shareholder
The amendment(s) was/were adby the shareholders was/were si	opted by the shareholders. The number of votes cast i	or the amendment(s)
☐ The amendment(s) was/were ap must be separately provided for	proved by the shareholders through voting groups. The each voting group entitled to vote separately on the c	e following statement mendment(s):
"The number of votes cast	for the amendment(s) was/were sufficient for approve	al
by		<u>.</u> n
	(voting group)	
selecte	rector, president or other officer – if directors or officed, by an incorporator – if in the hands of a receiver, true ed fiduciary by that fiduciary)	ers have not been ustee, or other court
	(Typed or printed name of person signing)	EN
	(Title of person signing)	