## P21000070806

| (Requestor's Name)                      |
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| PICK-UP WAIT MAIL                       |
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|   |
| (Business Entity Name)                  |
|   |
| (Document Number)                       |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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A. Butler

## **COVER LETTER**

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

|  |  |  | P 20        | PH 2:32 |
|--|--|--|-------------|---------|
| NAME OF CORPORATION: CONSUMABLE                      | SUPPLIES MANAGEMEN                                 | IT INC.  | <u> </u>    |         |
| DOCUMENT NUMBER: P21000070806                        |  |  |             |         |
| The enclosed Articles of Amendment and fee are s     | ubmitted for filing.                               |  |             |         |
| Please return all correspondence concerning this m   | atter to the following:                            |  |             |         |
| LOVETTE DOBSON                                       |  |  |             |         |
|  | Name of Contact Person                             | n  |             |         |
|  | Firm/ Company                                      |  |             |         |
| 17350 STATE HWY 249 ST                               | ΓE 220   |  |             |         |
|  | Address  | ·  |             |         |
| HOUSTON, TX 77064                                    |  |  |             |         |
|  | City/ State and Zip Cod                            | e  |             |         |
| EFILE1234@INCFILE.CO                                 | М  |  |             |         |
|  | ised for future annual report                      | notification)  | <del></del> |         |
| For further information concerning this matter, plea | ase call:  |  |             |         |
| LOVETTE DOBSON                                       | at ( 888   | 462-3453   |             |         |
| Name of Contact Person                               | Area Code & Daytime Telephone Number               |  |             |         |
| Enclosed is a check for the following amount made    | payable to the Florida Depa                        | artment of State:  |             |         |
| \$35 Filing Fee \$43.75 Filing Fee &                 | •  | <del>-</del>   |             |         |
| Certificate of Status                                | Certified Copy (Additional copy is enclosed)       | Certificate of Status Certified Copy (Additional Copy is enclosed) |             |         |
| Mailing Address                                      | Street Address                                     |  |             |         |
| Amendment Section                                    | Amendment Section                                  |  |             |         |
| Division of Corporations                             | Division of Corporations The Centre of Tallahassee |  |             |         |
| P.O. Box 6327<br>Tallahassee, FL 32314               | 2415 N. Monroe Street, Suite 810                   |  |             |         |

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of



CONSUMABLE SUPPLIES MANAGEMENT INC. (Name of Corporation as currently filed with the Florida Dept. of State) 27 SEP 20 AM 10: 27 P21000070806 (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: JANSAN INDUSTRIES, INC. 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) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 (Florida street address) New Registered Office Address: , 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)

Example:

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.

| X Change                      | <u>PT</u>                | John Doe    |                 |
|-------------------------------|--------------------------|-------------|-----------------|
| X Remove                      | $\underline{\mathbf{v}}$ | Mike Jones  |                 |
| X Add                         | <u>sv</u>                | Sally Smith |                 |
| Type of Action<br>(Check One) | <u>Title</u>             | <u>Name</u> | <u>Addres</u> s |
| 1) Change                     |                          | <u> </u>    | <u></u>         |
| Add                           |                          |             |                 |
| Remove                        |                          |             |                 |
| 2) Change                     |                          |             |                 |
| Add                           |                          |             |                 |
| Remove 3) Change              |                          | _           |                 |
| Add                           |                          |             |                 |
| Remove                        |                          |             |                 |
| 4) Change                     |                          |             |                 |
| Add                           |                          |             |                 |
| Remove                        |                          |             |                 |
| 5) Change                     |                          |             |                 |
| Add                           |                          |             |                 |
| Remove                        |                          |             |                 |
| 6) Change                     |                          |             |                 |
| Add                           |                          |             |                 |
| Remove                        |                          |             |                 |

| Attach additional sheets, if necessary). | (Be specific)  |
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| for amondment provides for an eval       | hange, reclassification, or cancellation of issued shares, |
| nrovisions for implementing the amo      | nendment if not contained in the amendment itself:         |
| (if not applicable, indicate N/A)        | · · · · · · · · · · · · · · · · · · ·                      |
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| 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 fil  | e date)                                      |
| Note: If the date inserted in the document's effective date on the | s block does not meet the applicable statutory filing requi<br>Department of State's records.                        | rements, this date will not be listed as the |
| 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 cast for the sufficient for approval.                               | the amendment(s)                             |
|  | approved by the shareholders through voting groups. The for each voting group entitled to vote separately on the ame |  |
| "The number of votes of  | ast for the amendment(s) was/were sufficient for approval  |  |
| by   |  |  |
|  | (voting group)   |  |
| SEPTEM<br>Dated  | ABER 14 2021   |  |
| Signature  | Joshua Wame  |  |
|  | a director president or other officer - if directors or officers   |  |
|  | cted, by an incorporator – if in the hands of a receiver, trusto<br>binted fiduciary by that fiduciary)              | ee, or other court                           |
|  | JOSHUA DAVIS   |  |
|  | (Typed or printed name of person signing)  |  |
|  | PRESIDENT  |  |
|  | (Title of person signing)  |  |