## 721000072969

(Requestor's	s Name)
(Address)	
(Address)	
(City/State/Z	(ip/Phone #)
PICK-UP V	VAIT MAIL
(Business E	intity Name)
(Document	Number)
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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: Excessory Lab Inc			
	BER: P21000072968			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	Brad Klein			
		Name of Contact Persor	1	
	Excessory Lab Inc.			
		Firm/ Company	<del></del> _	
	1048 SW 21ST AVE			
		Address	· - · · · · · · · · · · · · · · · · · ·	
	Boca Raton, FL 33486			
		City/ State and Zip Code		
	: 6 O			
	info@excessorylab.com	sed for future annual report	natification)	
	E-man address: (to be us	sed for future affidial report	notification)	
For further information	on concerning this matter, pleas	se call:		
Brad Klein		at (	441-1044	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check fo	or the following amount made	payable to the Florida Depa	artment of State:	
S35 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)	
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 lahassee. 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

Excessory Lab Inc	tion as currently filed with the Florida Dept. of State	<u></u>
	tion as currently fried with the Florida Dept. of State	<u> </u>
221000072968		
(Doc	ument Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florts Articles of Incorporation:	ida Statutes, this Florida Profit Corporation adopts the	following amendment(s)
A. If amending name, enter the new name of the	corporation:	
	<del></del>	<b>7</b> 11
ame must be distinguishable and contain the word Inc.," or Co.," or the designation "Corp," "h chartered," "professional association," or the ab	corporation, "company," or "incorporated" or the abc, or "Co". A professional corporation name mus	The new breviation "Corp.," t contain the word
3. Enter new principal office address, if applica Principal office address <u>MUST BE A STREET A</u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	BOX)	
D. If amending the registered agent and/or regined new registered agent and/or the new register	tered office address in Florida, enter the name of the ed office address:	
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:	, Florida,	(Zip Code)
New Registered Agent's Signature, if changing I	anistavad Ament.	

Signature of New Registered Agent, if changing

Check if applicable

 $\square$  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.

X Change	<u>PT</u> <u>Joh</u>	n Doc	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	P	Tiffany Tino	1048 SW 21ST AVE
, Add			BOCA RATON, FL 33486
X Remove			
2) Change	P	Brad Klein	1048 SW 21ST AVE
X Add			BOCA RATON, FL 33486
Remove 3 ) Change			
Add			<del></del>
Remove			<del></del>
4) Change			
Add			
Remove			
5) Change	<del></del>		
Add			
Remove			
6) Change			
Add			
Remove			

наси аааню,	nal sheets, if n	ecessary). (	(Be specific)				
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			<del>-</del>	<del></del> -			
an amendm	ent provides	for an exchan	ige, reclassific:	ation, or cance	llation of issue	1 shares.	
provisions fo	<u>r implementii</u>	ng the amend	ment if not co	ntained in the	amendment its	<u>elf:</u>	
(if not ap	pplicable, indic	ate N/A)					
							<u>-</u>
				•			

•

' L'ha data of agal	h amendment(s) adopt	08/17/2021		, if other than the
late this docume			<del></del>	, if other than the
Effective date <u>if</u>	f applicable:			
		(no more than 90 de	ays after amendment file date)	
		does not meet the applicabl ment of State's records.	e statutory filing requirements, this d	ate will not be listed as the
Adoption of An	nendment(s)	(CHECK ONE)		
The amendme action was no	-	by the incorporators, or boar	rd of directors without shareholder act	ion and shareholder
	ent(s) was/were adopted nolders was/were suffici		amber of votes east for the amendment	:(s)
			h voting groups. The following staten e separately on the amendment(s):	ient
"The ni	umber of votes cast for	he amendment(s) was/were s	ufficient for approval	
by	. <u> </u>	(voting group)	·"	
		(voling group)		
	08/17/2021 Dated	<del></del>		
	Signature			
	(Hy a direct selected, by	•	<ul> <li>if directors or officers have not been ands of a receiver, trustee, or other cor</li> </ul>	
	Bra	d Klein		
		(Typed or printed nan	ne of person signing)	
	Pre	sident		

(Title of person signing)