P23000058 106

	(Requestor's Name)	<u>-</u>	
	(Address)		
	(Åddress)		
	(City/State/Zip/Phone #)		
PICK-UF	wait	MAIL	
	(Business Entity Name)		
	(Document Number)		
Certified Copies	Certificates of S	Status	
Special Instructions to	Filing Officer:		
		!	



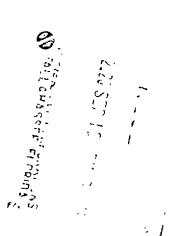


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FILED

2023 SEP 19 AM ID: 32

SECRETARY OF STAIR





115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

Date:	09/19/2023	
Name:	Xavian Brown	
Reference	#:2122520	
	e:	PB PRIME, INC.
Artic	cles of Incorporation/Author	orization to Transact Business
 Ame	endment	
☐ Cha	nge of Agent	
☐ Rein	nstatement	
☐ Con	version	
☐ Mer	ger	
☐ Diss	olution/Withdrawal	
☐ Ficti	tious Name	
☐ Othe	er	
Authorized	Amount: \$35.	00
Signature:	7	

F: +852.2682.9790

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: PB PRIME, INC		
DOCUMENT NUMB			
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	AUBREY HAMILTON		
•		Name of Contact Persor	1
	DUGGAN BERTSCH, LLC		
•		Firm/ Company	
	303 W. MADISON STREET	. SUITE 1000	
•		Address	
	CHICAGO, IL 60606		
-		City/ State and Zip Code	2
	AHAMILTON@DUGGANI	BERTSCH.COM	
	-	sed for future annual report	notification)
For further information	concerning this matter, pleas		263-8600
	f Contact Person	at (Area Co) 263-8600 de & 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 & 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)
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 shassee, FL 32314	Amend Division The Co 2415 i	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to Articles of Incorporation of



PB PRIME, INC. 2023 SEP 19 AM 10: 32 (Name of Corporation as currently filed with the Florida Dept. of State) JECHETARY OF STATE P23000058106 TALLAHASSEE, FLORID, (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: N/A 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." N/A B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) N/A N/A C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) N/A N/A 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 N/A (Florida street address) New Registered Office Address: (City) 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)

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: XChange	PT	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) N/A Change	N/A	N/A	N/A
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			·
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) AMENDING BUSINESS PURPOSE FROM "ANY AND ALL LAWFUL BUSINESS"
TO: "TO BE A DTC/B2B DISTRIBUTOR"
TO. TO BE A DICEBED DISTRIBUTOR
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
N/A

The date of each date this docume	n amendment(s) adoption:nt was signed.	, if other than the
Effective date <u>if</u>	applicable: (no more than 90 days after amendment file date)	
	e inserted in this block does not meet the applicable statutory filing requirements, this cative date on the Department of State's records.	date will not be listed as the
Adoption of Am	nendment(s) (<u>CHECK ONE</u>)	
The amendme action was not	ent(s) was/were adopted by the incorporators, or board of directors without shareholder act required.	tion and shareholder
	ent(s) was/were adopted by the shareholders. The number of votes cast for the amendmen holders was/were sufficient for approval.	t(s)
must be sepai	ent(s) was/were approved by the shareholders through voting groups. The following states rately provided for each voting group entitled to vote separately on the amendment(s): imber of votes cast for the amendment(s) was/were sufficient for approval	23
by	(voting group)	SECON AND TO
	9/19/2023 Dated	SEP 19 AN 10: 33 ALIARY OF STATE AHASSEE, FLORIDA
	Signature Alan Stein	
	(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other co appointed fiduciary by that fiduciary) ALAN STEIN	
	(Typed or printed name of person signing) PRESIDENT	
	(Title of person signing)	