

P99000084578

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☐ PICK-UP

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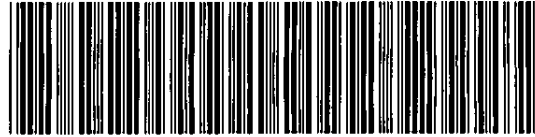
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SECRETARY OF STATE
18 APR 23 PM 4:22

FILED
2018 APR 23 AM 10:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. GOLDEN

APR 26 2019

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302

155 Office Plaza Dr Ste A Tallahassee FL 32301

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 4/23/18

NAME: CANNABIS CONSORTIUM, INC.

TYPE OF FILING: AMENDMENT

COST: 35.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

A handwritten signature in black ink, appearing to read "P. Hodge", is written over the printed name "PAUL HODGE". The signature is stylized and cursive.

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Cannabis Consortium, Inc.

DOCUMENT NUMBER: P99000084578

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Matthew Dwyer
Name of Contact Person

Firm/ Company

6810 N State Rd 7
Address

Coconut Creek, FL 33073
City/ State and Zip Code

matt@cannabisconsortium.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Matthew Dwyer at (954) 906-0098
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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) |
|---|--|---|--|

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 24, 2018

FLORIDA FILING & SEARCH SERVICES, INC.

SUBJECT: CANNABIS CONSORTIUM, INC.
Ref. Number: P99000084578

RECEIVED
DEPARTMENT OF STATE
18 APR 25 PM 12:30

We have received your document . However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Page 3 is missing.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Section 607.0802 or 617.0802, Florida Statutes, requires directors to be natural persons 18 years old or older.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden
Regulatory Specialist II

Letter Number: 418A00008250

Please keep original file
date. Thank you!

www.sunbiz.org

Articles of Amendment
to
Articles of Incorporation
of

Cannabis Consortium, Inc.

P99000084578

(Name of Corporation as currently filed with the Florida Dept. of State)

(Document Number of Corporation (if known))

FILED
2018 APR 23 AM 10:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

Global Consortium, Inc.

The new 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:

(City)

, Florida

(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

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:

☒ Change PT John Doe

☒ Remove V Mike Jones

☒ Add SV Sally Smith

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) ☐ Change	<u>D</u>	<u>Trans Global Group, Inc.</u>	<u>6810 N state Rd 7</u>
☐ Add			<u>Coconut Creek, FL 33073</u>
☒ Remove			<u></u>
2) ☐ Change	<u></u>	<u></u>	<u></u>
☐ Add			<u></u>
☐ Remove			<u></u>
3) ☐ Change	<u></u>	<u></u>	<u></u>
☐ Add			<u></u>
☐ Remove			<u></u>
4) ☐ Change	<u></u>	<u></u>	<u></u>
☐ Add			<u></u>
☐ Remove			<u></u>
5) ☐ Change	<u></u>	<u></u>	<u></u>
☐ Add			<u></u>
☐ Remove			<u></u>
6) ☐ Change	<u></u>	<u></u>	<u></u>
☐ Add			<u></u>
☐ Remove			<u></u>

E. If amending or adding additional Articles, enter change(s) here:
(Attach additional sheets, if necessary). (Be specific)

Article 1 Name

Remove Cannabis Consortium, Inc. and replace with Global Consortium, Inc.

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)

4/20/18

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 file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☒ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval
by TGGI _____."
(voting group)

- ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

4/24/18
Dated _____

Signature Matthew Dwyer
(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 court appointed fiduciary by that fiduciary)

Matthew Dwyer

(Typed or printed name of person signing)

President

(Title of person signing)