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OCT 20 2015 C MCNAIR

COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: Phillys Famous Water Ice, Inc DOCUMENT NUMBER: _ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Richard R Marquez Name of Contact Person Philly 3 Famous Water Tee, Inc. 1102 N. 28 H 5+.
Address Tampa, FZ 33605

City/ State and Zip Code Rick @ Phillyswirl. com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Ricle Marquez

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: **■**\$43.75 Filing Fee & □ \$35 Filing Fee □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment

to

Articles of	of Inco	rporation
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O_{I}	of	i poration			
Philly's	FAMOUS	Water 3	ICE, I	NC.	
(Name of Corpor	ration as currently	filed with the Florida	Dept. of State)	<u> </u>	
POG	000/207	20	:		The state of the s
(Do	cument Number of C	Corporation (if known)	,	0	VAL.
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation:	orida Statutes, this F	lorida Profit Corporat	ion adopts the fo	- 19 PM	ndment(s)
A. If amending name, enter the new name of the	e corporation:			2:29	
name must be distinguishable and contain the	<u></u>			The	new
"Corp.," "Inc.," or Co.," or the designation "Coword "chartered," "professional association," or B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A	the abbreviation "P tble:		orporation name	must contai	n the
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<i>BOX</i>)				
D. If amending the registered agent and/or regi		ss in Florida, enter th	e name of the		
new registered agent and/or the new register	red office address:		,		
Name of New Registered Agent			 _		
					
	(Florida stree	i address)			
New Registered Office Address:		City)	, Florida	(Zip Code)	
	ĮC.	zuy)		(Zip Coue)	
New Registered Agent's Signature, if changing I I hereby accept the appointment as registered agen		th and accept the oblig	rations of the po	sition.	
<u></u>	lignature of New Reg	gistered Agent, if chang	ging		

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	PT Johr	1 Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	SV Sall	y Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1)Change	CFO	John Sonthermer	1102 N. 28th ST
Add			Tampa, F2 33605
Remove			
2) Change	D	Craig Millican	1102 N. 28 th 5t. Tampa, FL 33605
_ X _ Add		<i>3</i>	Jampa, FL 33605
Remove			
3) Change	*****		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
5) Change		· · · · · · · · · · · · · · · · · · ·	
Add			
Remove			
6) Change	····		
Add			
Remove			

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)		onai sheet	is, if necess	ary).	<mark>les, enter ch</mark> (Be specific	9				
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The date of each amendment(s) adoption:	10/15/2015	, if other than the
date this document was signed.		
Effective date if applicable:	10/15/2015	
0	no more than 90 days after amendment file date,)
Note: If the date inserted in this block does not a document's effective date on the Department of Sta	meet the applicable statutory filing requirement te's records.	ts, this date will not be listed as the
Adoption of Amendment(s) (CHEC	K ONE)	
☐ The amendment(s) was/were adopted by the sha by the shareholders was/were sufficient for appr	reholders. The number of votes cast for the ameroval.	endment(s)
☐ The amendment(s) was/were approved by the sh must be separately provided for each voting greaters.	areholders through voting groups. The following oup entitled to vote separately on the amendmen	ng statement nt(s):
"The number of votes cast for the amendm	ent(s) was/were sufficient for approval	
by	"	
(voting	group)	
☐ The amendment(s) was/were adopted by the boa action was not required.	ard of directors without shareholder action and sl	hareholder
The amendment(s) was/were adopted by the incoaction was not required.	orporators without shareholder action and shareh	holder
Dated/0/15/2015	·	
	nt or other officer – if directors or officers have a prator – if in the hands of a receiver, trustee, or othat fiduciary)	
	rais Millican	
(Туј	ped of printed name of person signing)	
	Director of Operations	
	(Title of person signing)	