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### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	DRATION: EAST	LAKE FOX	D MARKET CORPURATION	01	
DOCUMENT NUM	1BER: <u>PO9 00</u>	0058513			
The enclosed Article	es of Amendment and fee are su	bmitted for filing.			
Please return all corr	espondence concerning this ma	tter to the following:			
	JULISSA ROSADO				
		Name of Contact Person			
	DCM SERVICES CENTER	INC			
		Firm/ Company	<del></del>		
	2529 W BUSCH BLVD STE	1000			
		Address			
	TAMPA, FLORIDA 33618				
		City/ State and Zip Code	<u> </u>		
	ESCHANDOLARING CIERDON S				
	DCMSERVICESCENTER@GMAIL.COM  E-mail address: (to be used for future annual report notification)				
	h-mail address: (to be u	sed for future annual report	notification)		
For further informati	ion concerning this matter, plea	se call:			
JULISSA ROSADO	)	at ( <u>813</u>	990-8630		
Name of Contact Person		Area Coo	le & Daytime Telephone Number		
Enclosed is a check	for the following amount made	payable to the Florida Depa	rtment of State:		
■ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	■\$52.50 Filing Fec Certificate of Status Certified Copy (Additional Copy is enclosed)		
Ar Di	ailing Address nendment Section vision of Corporations O. Box 6327	Amend Divisio	Address ment Section n of Corporations entre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment Articles of Incorporation

# EAST LAKE FOOD MARKET CORPORATION (Name of Corporation as currently filed with the Florida Dept. of State)

P0900	2005851	3	
(Docun	ent Number of Corporat	tion (if known)	
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida P	rofit Corporation adopts the foll	owing amendment(
A. If amending name, enter the new name of the co	rporation:		
			The new
name must be distinguishable and contain the word "co". "Inc.," or Co.," or the designation "Corp," "Inc." "chartered," "professional association," or the abbre	or "Co". A professi	or "incorporated" or the abbre onal corporation name must co	viation "Corp.,"
B. Enter new principal office address, if applicable (Principal office address <u>MUST BE A STREET ADL</u>		<del> </del>	
			75/20
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<b>3</b> 71		
(Maining address MAT BE A FOST OFFICE BO	<u> </u>	<del></del>	
			-3 PH 1: L3
D. If amending the registered agent and/or register		orida, enter the name of the	· 玩。
new registered agent and/or the new registered	office address:		٠.
Name of New Registered Agent			<del></del> -
	(Florida street address	9	
New Registered Office Address:		, Florida	
	(City)		(Zip Code)
New Registered Agent's Signature, if changing Reg	istored Agent:		
I hereby accept the appointment as registered agent.	l am familiar with and a	ecept the obligations of the posit	tion.
Signo	nture of New Registered	Agent, if changing	<del>_</del>
		THE STATE OF THE S	

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)

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>\$V</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	VP	AMARILIS MORAN	8706 HARNEY Rd
X Add			TAMPA FI 33637
Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change	<del></del>		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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rovisions for impl	ementing the amendn	ent if not containe	d in the amendmen	ssueu snares, nt itself:	
(if not applicable	e, indicate N/A)				
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	loption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file da	ie)
<b>Note:</b> If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirement of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shar	cholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the afficient for approval.	amendment(s)
	proved by the shareholders through voting groups. The follow each voting group entitled to vote separately on the amendn	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
<u> </u>	(voting group)	
Dated	17/22/2020	
Signature	ANA B. MORAN	
(By a di selected	rector, president or other officer – if directors or officers had, by an incorporator – if in the hands of a receiver, trustee, ced fiduciary by that fiduciary)	
	ANA B. MORAN (Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	PLESIDENT	
	(Title of person signing)	