## P16000049576

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



100300320971

06/19/17--01017--012 \*•43.75

JUN 23 2017 S. YOUNG



## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: A ONE FOOD ST	ORE INC	
DOCUMENT NUMB			
The enclosed Articles of	f Amendment and fee are su	abmitted for filing.	
Please return all corresp	ondence concerning this ma	atter to the following:	
,	VISHNU THALAPPIL		
<del>-</del>	<u> </u>	Name of Contact Perso	n
,	A ONE FOOD STORE INC		
-		Firm/ Company	
;	202 NICHOLAS PKWY E	rame company	
_		Address	
(	CAPE CORAL, FL 33990		
_		City/ State and Zip Cod	e
vishnu	seafarer@gmail.com		
		sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
VISHNU THALAPPIL		239	785-8022
Name of Contact Person		at ( 239 ) 785-8022  Area Code & 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)
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

## Articles of Amendment to Articles of Incorporation of

A ONE FOOD STORE INC	

ber of Corporation (if known) , this <i>Florida Profit Corporation</i> adopts the	: following	g amendn	nent(s) t
, this Florida Profit Corporation adopts the	e following	g amendn	nent(s) t
	e following	į amendn	nent(s) t
n:			
		24	
oration," "company," or "incorporated" 'or "Co", A professional corporation na tion "P.A"			m
202 NICHOLAS PKWY E			
CAPE CORAL, FL 33990		-1	•
address in Florida, enter the name of th	<u>e</u> :	£	
и.	: ::	, <del>, , ,</del> ,	
WY E. CAPE CORAL, FL 33990		: `	
ida street address)			
Florid	33913		
	(Zip Code)		
	or "Co". A professional corporation nation "P.A"  202 NICHOLAS PKWY E  CAPE CORAL, FL 33990  address in Florida, enter the name of the dress:  II.  WY E. CAPE CORAL, FL 33990  da street address)  FRA FORT MYERS	202 NICHOLAS PKWY E  CAPE CORAL, FL 33990  address in Florida, enter the name of the dress:  H.  WY E. CAPE CORAL, FL 33990	202 NICHOLAS PKWY E  CAPE CORAL, FL 33990  address in Florida, enter the name of the dress:  II.  WY E. CAPE CORAL, FL 33990  da street address)  FRA FORD MYERS  33912

## 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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Cheek One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	12	AJESH BALANANDAN	3806 SW 15TH PL
Add X Remove			CAPE CORAL, FL 33914
2) Change	VP	JINOY VARGHESE	1307 LAREL GLEN DR
Add			BARTOW, FL 33830
Remove  3 ) Change	P	VISHNU THALAPPIL	202 NICHOLAS PKWY E
X Add Remove			CAPE CORAL, FL 33990
4) Change Add			
Remove			
5) Change			
Add			
6) Change	<del></del>		
Add			

ttach additional she	ets, if necessary). (Be	e specific)			
	-				
					· · · · · ·
	<del>-</del>		<del></del>		
				<del></del>	
	<del></del>				
			<del></del>		
		-			
<del>.</del>				<u></u>	
rovisions for imple	oyides for an exchange ementing the amendm	e, reclassification, o	r cancellation of it I in the amendmen	sued shares, t itself:	
(if not applicable	le, indicate N/A)	<del></del> -			
	· · · · · · · · · · · · · · · · · · ·				
		-	7.0.		
<del></del>			<u> </u>		

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
06/15/2017 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 document's effective date on the Department of State's records.	will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes east 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 statemen must be separately provided for each voting group entitled to vote separately on the amendment(s):	ı
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(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.	
Dated 06/15/2017	
Signature	
(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)	
AJESH BALANANDAN	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	