320174

(Re	questor's Name)	
(Address)		
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(Cit	ry/State/Zip/Phone	e #)
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(Do	cument Number)	1
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Amendment Section Division of Corporations		
NAME OF CORPORATION: PROMI) extoods, Inc	
DOCUMENT NUMBER:	AM 11 AM 12 AM	
The enclosed Articles of Amendment and fee are sub	bmitted for filing.	
Please return all correspondence concerning this mat	ter to the following:	
M: Ami Jeff C Sws	Name of Contact Person OODS INC. Firm/ Company 32 Ave Address FC. 33147 City/ State and Zip Code 24-Foods Com ed for future annual report notification)	
For further information concerning this matter, pleas	e call:	
JEFFRED WINC	at 305 691 2435	
Name of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount made p	payable to the Florida Department of State:	
\$35 Filing Fee \$\sum \text{Certificate of Status}\$	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Street Address		
Amendment Section Division of Corporations	Amendment Section Division of Corporations	

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 30, 2013

JEFFREY WINE PRAWN SEAFOODS, INC. 6894 NW 32 AVE MIAMI, FL 33147

SUBJECT: PRAWN SEAFOODS, INC.

Ref. Number: 320174

We have received your document for PRAWN SEAFOODS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please submit the document in its entirety.

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.

Irene Albritton
Regulatory Specialist II

Letter Number: 913A00029300





Articles of Amendment to Articles of Incorporation of

Veaun Dea Foods (Document Number	er of Corporation (if known)	<u> </u>	
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation:	orida Statutes, this Florida Profit	t Corporation adopts the fo	llowing amendment(s) to
A. If amending name, enter the new name of the	ne corporation:		
name must be distinguishable and contain the "Corp" "Inc.," or Co.," or the designation "Coword "chartered," "professional association." or B. Enter new principal office address, if applic	Corp," "Inc." or "Co". A profe r the abbreviation "P,A."	v." or "incorporated" or	The new the abbreviation must contain the
(Principal office address MUST BE A STREET.			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	E BOX)		
D. If amending the registered agent and/or reg new registered agent and/or the new register		a, enter the name of the	14 PER 27
Name of New Registered Agent		<u></u>	<u> </u>
· .	(Florida street address)		平 8:12
New Registered Office Address:	(City)	, Florida(Zip Co	
New Registered Office Address.			

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	John Doe	
X Remove	<u>Y</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name Address	
1) Change	V	Larry Fishman Hago Rockinghorse	2 1
Add Remove		Hollywood Find 33026	
2) Change			
Add Remove			
Change Add		<u> </u>	
Remove			
4) Change			
Add Remove			
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 NA)	Attach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)
f an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:		
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(if not applicable, indicate N/A)	provisions for implementing the ame	endment if not contained in the amendment itself:
	(if not applicable, indicate NA)	•

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)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes east for the amenda by the shareholders was/were sufficient for approval.	ment(s)
The amendment(s) was/were approved by the shareholders through voting groups. The following so 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" (voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shar action was not required.	eholder
The amendment(s) was/were adopted by the incorporators without shareholder action and sharehold action was not required.	der ·
Dated LL 1413	
Signature (By a director, president or other officer – if directors or officers have not selected, by an incorporator – if in the hands of a receiver, trustee, or other appointed fiduciary by that fiduciary)	
Teff (Typed or printed name of person signing)	
(1 speed or printed name of person signing)	
(Title of person signing)	