K48431

(Re	equestor's Name)
	'
(Ac	ddress)
(Ac	ddress)
(C	ity/State/Zip/Phone #)
_	
PICK-UP	WAIT MAIL
(Bi	usiness Entity Name)
(D	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer
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SECRETARY OF STATE

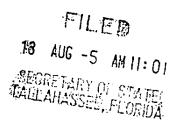
AUG -7 2013

R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations		
NAME OF CORPORATION: A JOY WAL	LACE CATERING I	PRODUCTION INC
DOCUMENT NUMBER: K48431	<u> </u>	
The enclosed Articles of Amendment and fee are s	ubmitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
·		
REINALDO L RA		
	Name of Contact Persor	1
	Firm/ Company	
8501 SW 129TH	• •	
	Address	1111
MIAMI, FL 33156	6	
	City/ State and Zip Cod	e
REINALDOR@AJO	YWALLACE.COI	M
E-mail address: (to be t	used for future annual report	notification)
For further information concerning this matter, plea	ase call:	
REINALDO L RAMOS	at (305	252-0020
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address		Address
Amendment Section Division of Corporations		Iment Section on of Corporations
P.O. Box 6327	Cliftor	Building
Tallahassee, FL 32314		Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of



A JOY WALLACE CATERING PRODUCTION, INC

(Name of Corporation as currently fi	iled with the Flor	rida Dept. of State)		-
K48431				
(Document Number of	Corporation (if k	nown)		•
Pursuant to the provisions of section 607,1006, Floridatis Articles of Incorporation:	a Statutes, this <i>Fl</i>	orida Profit Corporation ad	lopts the following	g amendment(s) to
A. If amending name, enter the new name of the co	orporation:			
				_The new
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corp word "chartered," "professional association." or the	o, " "Inc," or "Ce	". A professional corpore		
B. Enter new principal office address, if applicable (Principal office address <u>MUST BE A STREET ADD</u>				-
				-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>)X</u> 7			-
			4/8	-
D. If amending the registered agent and/or registe	and office address	a in Elevida, entanthe nam	no «Ctho	-
new registered agent and/or the new registered		s m riorma, emer me nan	ne or the	
Name of New Registered Agent				
	(Florida stree)	·		
New Registered Office Address:	(City)	, Florida_	(Ziv Code)	-
	(< 10)		(1.1), (1.11.1.)	
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.		h and accept the obligation	s of the position.	
	·			
Signature of N	ew Registered Ag	ent, 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.

X Change	PT	John Doc	
X Remove	\underline{V}	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	S	ADELEE V. CABRERA	8501 SW 129TH TERR
Add			MIAMI, FL 33156
X Remove			
2) Change	S	REINALDO L. RAMOS	8501 SW 129TH TERR
X Add			MIAMI, FL 33156
Remove			
3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Artic Attach additional sheets, if necessary),	(Be specific)
1 10 110 110 110 110 110 110 110 110 11	
If an amendment provides for an eych	hange, reclassification, or cancellation of issued shares,
provisions for implementing the amer (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
(у пов аррисате, такжие мл.)	

The date of each amendment	(s) adoption: 08/01/2013
Effective date <u>if applicable</u> :	08/01/2013
e in the interest of the inter	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.
	e approved by the shareholders through voting groups. The following statement d 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)
	(voting group)
The amendment(s) was/wer action was not required.	e adopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and shareholder
Dated_8/1/	2013
	(120,001
	e director, president of other officer – if directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	REINALDO L RAMOS
	(Typed or printed name of person signing)
	SECRETARY
	(Title of person signing)