## M18905

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C. GOLDEN

DEC -1 2017

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Italian Rose	Garlie Products. Inc.
DOCUMENT NUMBER: M18905	
The enclosed Articles of Amendment and fee	are submitted for filing.
Please return all correspondence concerning th	is matter to the following:
Julie Wells	
Evans Petree PC	Name of Contact Person
	Firm/ Company
1000 Ridgeway Loop R	Road, Suite 200
	Address
Memphis, TN 38120	
	City/ State and Zip Code
	only office and hip code
jwells@evanspetree.com	
E-mail address: (to	be used for future annual report notification)
For further information concerning this matter,	please call:
Julie Wells	at (901 ) 474-6107
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount r	nade payable to the Florida Department of State:
S35 Filing Fee S43.75 Filing Fee Certificate of Sta	
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

Italian Rose Garlie Products, Inc.

FILEU

2017 MOY 30 AM II: 57

· (Nam	e of Cornoration as currently	filed with the Florida Dept. of State)	
	e or corporation as currently	1 ·	LE CEURIDA
M18905			
<u> </u>	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 60 ts Articles of Incorporation:	7.1006. Florida Statutes, this <i>I</i>	Florida Profit Corporation adopts the follo	wing amendment(s)
A. If amending name, enter the new	name of the corporation:		
KenArt, Inc.			Thu
name must be distinguishable and co "Corp.," "Inc.," or Co.," or the desi word "chartered," "professional assoc	gnation "Corp." "Inc," or "C	," "company," or "incorporated" or th To". A professional corporation name m P.A."	The new e abbreviation ust contain the
B. Enter new principal office address	e if annlicable:	N/A	
Principal office address MUST BE A			
	· · · · · · · · · · · · · · · · · · ·		
C. Enter new mailing address, if app		N/A	
(Mailing address <u>MAY BE A POS</u>	<u>T OFFICE BOX</u> )		<del></del>
			<del></del>
). If amending the registered agent i	and/or registered office addre	nee in Florida, antar the name of the	
new registered agent and/or the n		ess in Florida, enter the flame of the	
	N/A		
Name of New Registered Agen	<u>/</u>	-	<del></del>
	(Florida stre	et address)	<del></del>
New Registered Office Address	N/A	Planta.	
New Registered Office Address		, Florida City	Zip Code)
			34, (134,)
New Registered Agent's Signature, if	ichanging Pogistored Agent:		
hereby accept the appointment as regi	istered agent. I am familiar w	ith and accept the obligations of the position	m.
		, , , , , , , , , , , , , , , , , , , ,	
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	i		
	Signature of New Re	gistered Agent, if changing	<del></del>
	1	Committee and the second secon	

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>V</u> <u>Mike</u>	Jones	
X Add	SV Sally	Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change			
Add	!		
Remove	1		<del></del>
2) Change			
Add	•		
Remove			
3) Change			
Add	1	· · · · · · · · · · · · · · · · · · ·	
Remove	1		
4) Change			
Add			
Remove			
5) Change			
Add			
Remove	·		
6) Change			
Add			
Remove			

E. <u>If amending or adding additional sheets</u> , if	ditional Articles, e necessary). (Be	nter change(s) hei	<u>re</u> :		
N/A	1.				
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F. If an amendment provides	for an exchange,	reclassification, o	r cancellation of iss	ued shares,	
provisions for implement (if not applicable, ind	ing the amendmer icate N/A)	nt if not contained	in the amendment	itse <u>ll:</u>	
N/A					
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The date of each amendment(s) ac	loption;	
date this document was signed.	İ	
Effective date ff anglicable:	1	
	(no more than 90 days after amendaum! file date)	
Note: If the date inserted in this be document's effective date on the Be	lock does not meet the applicable scatutory filing requirements, this department of State's records.	ate will not be listed as the
Adoption of Assendment(s)	(CHRCK ONE)	
The amendment(s) was/were ado by the shareholders was/were su	pled by the shareholders. The number of votes cast for the amendment(	s)
The emendment(s) was/were app must be separately provided for	roved by the therebolders through voting groups. The following statements with voting group entitled to vote separately on the aniendment(s):	ent
"The number of votes cast	for the smendment(s) was/were sufficient/for approval	
pl		
	(voting group)	
The amendments is westvere about on was not required.	ptid by the board of directors without shareholder action and sharehold	<b>-</b>
The amendment(s) was/were add action was not required.	pted by the incorporators without shimbholder action and shareholder	
L1/15/2017 Dated		
Signizauro 👤	Louis Comman	
splecter	rector, president of ather officer (Milroctom or officers have not been 1. by an incorporator,— if in this hands of a receiver, trustee, or other counted fiduciary by that fiduciary)	n
	Kenneth J. Berger	
	(Typed or printed name of person signing)	
	President	
	(Title of parson elgning)	<del></del>