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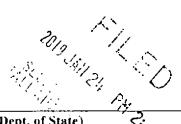
TO: Amendment Section Division of Corporations FOOD4KIDZ, INC. NAME OF CORPORATION: N11000008046 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **BOBBIE BRIGMAN** (Name of Contact Person) FOOD4KIDZ, INC. (Firm/ Company) 22811 PANAMA CITY BEACH PARKWAY, #26 (Address) PANAMA CITY BEACH, FL. 32413 (City/ State and Zip Code) food4kidz@hotmail.com - or - bobbiebrigman@msn.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 850 624-7485 **BOBBIE BRIGMAN** (Daytime Telephone Number) (Name of Contact Person) (Area Code) Enclosed is a check for the following amount made payable to the Florida Department of State: □\$52.50 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & **■** \$35 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (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



FOOD4KIDZ, INC.

(Name of Corporation as curr	ently filed with the Florida Dep	ot. of State)
N11000008046		<i>ک</i> ن
(Document Nur	mber of Corporation (if known)	14
fursuant to the provisions of section 617.1006, Florida Statemendment(s) to its Articles of Incorporation:	utes, this Florida Not For Profit	Corporation adopts the following
A. If amending name, enter the new name of the corpor	ation:	
	<u> </u>	The new
ame must be distinguishable and contain the word "corpo	ration" or "incorporated" or the	e abbreviation "Corp." or "Inc."
Company" or "Co," may not be used in the name.		
B. Enter new principal office address, if applicable:	·····	
Principal office address <u>MUST BE A STREET ADDRES</u>	<u> </u>	
		<u> </u>
Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	POST OFFICE BOX 7707	
	DANIANA CUTY DEACH E	7. 22412
	PANAMA CITY BEACH, F	L 32413
		5.1
 If amending the registered agent and/or registered of new registered agent and/or the new registered office 		he name of the
		
Name of New Registered Agent:		
New Registered Office Address:	(Florida stre	vet address)
		m
	(City)	, Florida (Zip Code)
	(011,7)	(inf) conty
New Registered Agent's Signature, if changing Register	ed Agent:	inations of the position
hereby accept the appointment as registered agent. I am	јатинаг wun ала ассері іне оби	igations of the position.
 -	Signature of New Registered Ag	vent if changing
	organitate of them registered ag	em, y sminging

address of each Office (Attach additional shee Please note the officer/of P = President; V = Vice	er and/or Directs, if necessary director title by President; T=) = Chief Finar	ctor heing added:)))) the first letter of the office title: Treasurer; S= Secretary; D= Director; ncial Officer. If an officer/director holds	n officer/director being removed and title, na TR= Trustee: C = Chairman or Clerk; CEO = more than one title, list the first letter of each o	Chief
	caves the corpo	oration, Sally Smith is named the V and S	d as the PST and Mike Jones is listed as the V. These should be noted as John Doe, PT as a C	
Example: X Change X Remove X Add	<u>V</u> <u>M</u>	hn Doe ike Jones illy Smith		ı. F
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) X Change	p	BOBBIE BRIGMAN	22811 PCB PKWY, #26	
_ Add			PCB, FL 32413	
Remove			(850) 624-7485	
2) Change	VP, S	PATRICIA POULSON	410 JUNCO COURT, APT. 129	
XAdd			TALLAHASSEE, FL 32304	} ;
Remove			(850) 773-8378	
			-	
3)Change		· · · · · · · · · · · · · · · · · · ·		
Add				
Remove				
4) Change				i
Add				i
Remove				<u> </u>
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				1

Page 2 of 4

E. If amending or adding additional Arti	icles, enter change(s) here:
(attach additional sheets, if necessary).	(Be specific)
-	

•	SEPTEMBER 14, 2018		
The date of each amendment(_, if other than t	he
late this document was signed,			
Effective date <u>if applicable</u> :	JUNE 22, 2018		
Meetive date <u>it applicante</u> .	(no more than 90 days after amendment file date)		
	is block does not meet the applicable statutory filing requirements, this date will not be Department of State's records.	be listed as the	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
The amendment(s) was/we was/were sufficient for app	ere adopted by the members and the number of votes cast for the amendment(s) proval.		
There are no members or adopted by the board of d	members entitled to vote on the amendment(s). The amendment(s) was/were irectors.		
JANU Dated	JARY20, 2019		
Signature	Inthe Dougman		
(By the have no	chairman or vice chairman of the board, president or other officer-if directors of been selected, by an incorporator – if in the hands of a receiver, trustee, or ourt appointed fiduciary by that fiduciary)	_	
	DBBIE BRIGMAN		
	(Typed or printed name of person signing)		
PI	RESIDENT		
	(Title of person signing)		