N3000056

(Requestor's Name) (Address)	300304130973
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name)	10/10/1701041009 **52.50
Certified Copies Certificates of Status Special Instructions to Filing Officer:	2017KOV -1 PH 4: 09 SECRETARESEE PEORIDA
Office Use Only	Anundicus

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FLORIDA DEPARTMENT OF STATE Division of Corporations

October 11, 2017

FREDERICK J. HERZOG, PHD DR. FREDERIXK J. HERZOG, PHD LLC 1201 W. BEAGLE RUN LOOP HERNANDO, FL 34442

SUBJECT: FOOD GENERATION, INC.

Ref. Number: N13000007542

We have received your document for FOOD GENERATION, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

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

Then your lite

Letter Number: 817A00020487

www.sunbiz.org

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	Food Generation,Inc		·		_
DOCUMENT NUMBER:	N13000007542				-
The enclosed Articles of Am	nendment and fee are subm	nitted for filing.			
Please return all corresponde	ence concerning this matter	r to the following:			•
Frederick J Herzog, PhD					
		(Name of Contact Perso)n)		-
Dr Frederick J Herzog, PhD	LLC				
		(Firm/ Company)			-
1201 W. Beagle Run Loop					
 		(Address)			- '
Hernando, FL 34442					
	· · · · · · · · · · · · · · · · · · ·	(City/ State and Zip Cod	de)	- <u>1</u>	_
drfrederickjherzog@gmail.c	com				
E	-mail address: (to be used	for future annual report	notification)	-	- '
For further information conc	erning this matter, please of	call:			
Frederick J Herzog, PhD		84 at	47-899-900C		i
	(Name of Contact Person)		Area Code) (Daytime Tel	ephone Number)	-
Enclosed is a check for the f	ollowing amount made pay	yable to the Florida Dep		 	
P.O. Box	nt Section of Corporations	Certified Copy (Additional copy is enclosed) Stree Amen Divisi Clifto 2661	ndment Section ion of Corporations on Building Executive Center Circle	01 10/2/1 10/2/1	Vo. 5387
			Plu	of Jawase	1

Articles of Amendment to Articles of Incorporation of

Food Generation, Inc				
(Name of Corporation as	currently filed with the Flori	da Dept. of State)	Ī	
N13000007542				
(Documen	nt Number of Corporation (if kn	own)		
Pursuant to the provisions of section 617.1006, Floridamendment(s) to its Articles of Incorporation:	a Statutes, this Florida Not For	Profit Corporation adopts the	following	
A. If amending name, enter the new name of the co	orporation:			
na			 The new	
name must be distinguishable and contain the word " "Company" or "Co." may not be used in the name.	corporation" or "incorporated	" or the abbreviation "Corp."		
B. Enter new principal office address, if applicable	1201 W. Beagle Run I	1201 W. Beagle Run Loop		
(Principal office address <u>MUST BE A STREET ADI</u>				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	same as above	SECHE	-	
		ASSET TO THE		
D. If amending the registered agent and/or registe	red office address in Florida.	···· /		
new registered agent and/or the new registered		<u> </u>	2	
Name of New Registered Agent:	r Frederick J Herzog, PhD			
12	201 W. Beagle Run Loop			
— <u>New Registered Office Address:</u>	(Flo	erida street address)		
Н	ernando	do 34442 , Florida		
_	(City)	(Zip Code)		
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.		The obligations of the position. The property of the position	11	

Page 1 of 4

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.				
	ives the c	orporation, Sally Smith is named the V and S	ed as the PST and Mike Jones is listed as the S. These should be noted as John Doe, PT as	
Example: X Change X Remove X Add	<u>PT</u> <u>Y</u> <u>SV</u>	John Doe Mike Jones Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change	Treas	Nancy Smith	811 Lanark Crt	
Add			Inverness, FL 34453	
x Remove				
2) Change	Secr	James E. White	811 Lanark Crt	
Add			Inverness, FL 34453	
x Remove				
3) Change	Treas	James E. White	811 Lanark Crt	
X Add			Inverness, FL 34453	
Remove				
4) Change	Secr	Leonard H. Bishop	3989 E. Jesser Lane	
x Add			Inverness, FL 34453	<u> </u>
Remove				<u> </u>
5) Change	Dir	Jennifer Jenson	811 Lanark Crt	
Add			Inverness, FL 34453	
x Remove				<u></u>
6) Change	Dir	Dianna Bandhauer	811 Lanark Crt	
Add			Inverness, FL 34453	
x Remove			See 7) on page 3 of 4	1

Page 2 of 4

A LUC - LOCK - IDC - CL - C 2. B C A Luis Dia 913 Lanada Car Insuran	ana 171
Additional Officer/Director Changes from page 2: Remove Summer Alvis-Dir 811 Lanark Crt., Invern	ess, rt
	<u> </u>
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	,
	
	

	9-5-17	
	late of each amendment(s) adoption:	other than the
••••	9-5-17	
Effe	tive date if applicable:	 -
	(no more than 90 days after amendment file date)	
	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be linent's effective date on the Department of State's records.	sted as the
4da	tion of Amendment(s) (CHECK ONE)	
	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
	Dated 9-5-17	
	Signature Jumn Markeli	'
	(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or	
	other court appointed fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	PRES, DENT	
	(Title of person signing)	l l