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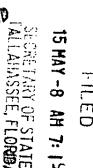
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Pretty Fresh, In	nc.		
N15000002443		•	
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee ar	e submitted for filing.		
Please return all correspondence concerning this	matter to the following:		
Alecia C. Daniel, Esq.			
	(Name of Contact F	erson) '	
Genesis Law, P.A.			
	(Firm/ Compan	y)	
2500 NE 135th St., B508			
	(Address)		
North Miami, FL 33181			
	(City/ State and Zip	Code)	
adaniel@prettyfresh.co		, F	. • .
E-mail address: (to b	e used for future annual re	port notificati	on)
For further information concerning this matter, p	please call:		
Alecia C. Daniel	а	786 t	315-9638
(Name of Contact F	Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount ma	ade payable to the Florida	Department o	f State;
\$35 Filing Fee \$\Bigcup \\$43.75 Filing F Certificate of S	Tee & \$\Bigsiz\$ \$\\$43.75\$ Filing Fee tatus Certified Copy (Additional copy enclosed)	Cert is Cert (Add	50 Filing Fee ificate of Status ified Copy ditional Copy is closed)
Mailing Address Amendment Section		reet Address	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Pretty Fresh, Inc.		
(Name of Corporation as curren	tly filed with the Flori	da Dept. of State)
N15000002443		
(Document Numb	er of Corporation (if kr	own)
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not For</i>	r Profit Corporation adopts the following
A. If amending name, enter the new name of the corporat	ion:	
Pretty Fresh Foundation, Inc.		The ne
name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	tion" or "incorporated	
B. Enter new principal office address, if applicable:	667 NW 90th St	
(Principal office address <u>MUST BE A STREET ADDRESS</u>	Miami, FL 33150	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
D. If amending the registered agent and/or registered offinew registered agent and/or the new registered office a		enter the name of the
N/A		
Name of New Registered Agent:		
	(Flo	orıda street address)
New Registered Office Address:		· · · · · · · · · · · · · · · · · · ·
N/A		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered		
I hereby accept the appointment as registered agent. I am fa	miliar with and accept	the obligations of the hition.
		E G
	ignature of New Registe	ered Agent, if changing
	<i>v</i> 6	SSE &

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.

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 X Remove X Add	<u>PT</u> <u>V</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			
Add			
Remove			
2) Change			
Add			
Remove			No.
3) Change	******		
Add			
Remove		•	
4) Characa			
4) Change			
Add Remove			
5) Change			
Add			
Remove			*****
6) Change			
Add	•		
Remove			

E. If amending or adding additional Articles, enter change(s) here:			
E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)	:		
N/A			
N/A			
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The date of each amen	idment(s) adoption:	, if other than the
date this document was	signed.	
	5/3/15	
Effective date if applic	able:	
	ed in this block does not meet the applicable statutory filing requirements, this date will ate on the Department of State's records.	not be listed as the
Adoption of Amendmo	ent(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were sufficien	was/were adopted by the members and the number of votes cast for the amendment(s) t for approval	
There are no mem adopted by the bo	bers or members entitled to vote on the amendment(s). The amendment(s) was/were ard of directors.	
Dated	5/3/15	
Signature	the property file and the second control to	
	(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)	
	Alecia C. Daniel, Esq.	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	