P00000029179

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Nam	ne)
(D	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only

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11/16/09--01032--022 **35.00



Amend.

DEC 0 1 2009



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 20, 2009

WILLIAM VASQUEZ 7380 W. SAND LAKE ROAD SUITE 400 ORLANDO, FL 32819

SUBJECT: MATHEW'S FOOD STORE INC.

Ref. Number: P00000029179

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

The registered agent must sign accepting the designation.

Mign of

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) 245-6906.

Darlene Connell Regulatory Specialist II

Letter Number: 709A00036107

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION:	MATHEW'S FOOD STOR	RE, INC.	
DOCUMENT NU	MBER:	P00000029179	9	
The enclosed Artic	les of Amendment and fee	are submitted for filing.		
Please return all co	rrespondence concerning th	is matter to the following:		
_		VILLIAM VASQUEZ		
	,	Name of Contact Person		
A & A BUSINESS SERVICES, IN		JSINESS SERVICES, INC.		
	Firm/ Company			
_	7380 W. SAND LAKE RD. SUITE 400			
	Address			
		RLANDO, FL. 32819		
	•	City/ State and Zip Code		
	E-mail address: (to be us	SS@BELLSOUTH.NET ed for future annual report notification)	 _	
For further informa	ition concerning this matter	. please call:		
	WILLIAM	at (407)	383-7812	
Name	of Contact Person	Area Code & Daytime T	Telephone Number	
Enclosed is a check	tor the following amount	made payable to the Florida Depa	artment of State:	
☑ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Ac	ldress	Street Address		
Amendment Section		Amendment Section		
Division of Corporations		Division of Corporations		
P.O. Box 6327		Clifton Building		
Tallahassee, FL 32314		2661 Executive Center Cir	rele	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

MATHEW'S	FOOD STORE	: INC		
(Name of Corporation as cur	rently filed with the	Florida Dept. of S	State)	
PO	0000029179			
(Document Nu	unber of Corporation	(if known)		
Pursuant to the provisions of section 607.10 amendment(s) to its Articles of Incorporation:		this <i>Florida Profi</i>	it Corporation adopts	s the following
A. If amending name, enter the new name	of the corporation:			
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pr	he designation "Corp.	," "Inc," or "Co"	" or "incorporated . A professional cor	The new " or the poration
B. Enter new principal office address, if ap	pplicable:		200	99
(Principal office address MUST BE A STRE	ET ADDRESS)		220	MON 60
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)		drogg in Florido	SSET FIND OF STATE	1 SD 30 PH 2: 30
D. If amending the registered agent and/or new registered agent and/or the new reg			mer me name of the	-
Name of New Registered Agent:	MATHEW MAT	HEW	_	
	6500 CREWS L		OP DR.	
New Registered Office Address:	(Florida	street address)		
	LAKELAND		. Florida <u>33</u> 813	
	(City)	(Zip Code)	
New Registered Agent's Signature, if change I hereby accept the appointment as registered	l agent. Þám f y miliai	r with and accept to		position.

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
PD	JACOB MATHEW	4670 HWY 17 NORTH BARTOW FL 33830	☐ Add ☑ Remove
<u>VP</u>	SHERIN MATHEW	6500 CREWS LAKE HILLS LOOP DR. LAKELAND FL. 33813	∠ Add □ Remove
<u>VP</u>	JETTYMOL J. MATHEW	5554 EMERALD RIDGE BLVD. LAKELAND, FL. 33813	, ☑ Add □ Remove
	ing or adding additional Articles, ent ditional sheets, if necessary). (Be spo		
ARTICLE I	: CHANGE TITLE FROM SD TO	PRESIDENT TO: MATHEW M	ATHEW
ADDRESS	: 6500 CREWS LAKE HILLS LC	OOP DR. LAKELAND #4 33813	
provisio	nendment provides for an exchange, in the implementing the amendment of applicable, indicate N/A)		
ARTICLE	II: REDUCE SHARES FROM 50	TO 0 JACOB MATHEW	
ARTICLE	II: ADD SHARES FROM 0 TO 5	0 JETTYMOL J. MATHEW	

The date of each amendmen	t(s) adoption: 11/03/2009
Effective date <u>if applicable</u> :	11/03/2009 (date of taitopinon is required)
· · · · ·	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(street sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement and for each voting group entitled to vote separately on the amendment(s):
"The number of votes	s cast for the amendment(s) was/were sufficient for approval
by	(voting group)
action was not required.	ere adopted by the board of directors without shareholder action and shareholder ere adopted by the incorporators without shareholder action and shareholder
sel	y a director, president or 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)
	MATHEW MATHEW
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)