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3500001ARY OF STATE
TALLAHASSEE, FLORID

2/2/14

COVER LETTER

TO: Amendment Section Division of Corporations

The state of the s			
NAME OF CORPORATION: J. P. G.F	PRETZEL INC		
DOCUMENT NUMBER: P01000107	226		
The enclosed Articles of Amendment and fee are so			
Please return all correspondence concerning this ma	atter to the following:		
SARA HAN			
	Name of Contact Person	n	
	Firm/ Company		
4401 EMERS	ON ST STE 8		
	Address	·	
JACKSONVIL	LE, FL 32207		
	City/ State and Zip Cod	е	
LIANCTAVOLLIC		SOM.	
HANSTAXOFFIC			
E-mail address: (to be u	ised for future annual report	notification)	
For further information concerning this matter, please	ise call:		
SARA HAN	at (904	, <u>346-1961</u>	
Name of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State:	
□ \$35 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address	Street	Address	
Amendment Section	Amendment Section		
Division of Corporations P.O. Box 6327		on of Corporations Building	
Tallahassee, FL 32314		Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

FILED

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(Name of Corporation as currently filed with the Florida Dept. of State)

P01000107226

SECRETARY OF STATE TALLAHASSEE, FLORIDA

(Document Number of Corporation (if known)

nt(s) to

If amending name, enter the new name of the MMA'S J P G INC			The
me must be distinguishable and contain the vorp.," "Inc.," or Co.," or the designation "Cord" "chartered," "professional association," or t	orp," "Inc," or "Co". A profes		
Enter new principal office address, if applica rincipal office address <u>MUST BE A STREET A</u>			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>BOX</u>)		
If amending the registered agent and/or reginew registered agent and/or the new register		enter the nan	ne of the
Name of New Registered Agent			
	(Florida street address)		
	,		
New Registered Office Address:	,	, Florida_	(Zip Code)

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 Doc				
X Remove	<u>V</u>	Mike Jones			. /	
X Add	<u>sv</u>	Sally Smith				
Type of Action (Check One)	Title	Name		Add	<u>res</u> s	
1) Change				_ /		
Add				/ —		
Remove				/ $-$		
2) Change			/	/ —		
Add						
Remove						•
3) Change			/			
Add			. /			
Remove			\bigvee			
4) Change					.	
Add			/ `			
Remove						
5) Change						
Add						
Remove		\checkmark				
6) Change		-	· · ·			
Add						
Remove						

attach additional sheets, if necessary).	(Be specific)
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7	
	/
an amendment provides for an exch	change, reclassification, or cancellation of issued shares, tendment if not contained in the amendment itself:
orovisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
· · · _ <u> </u>	
	/

date this document was signed.	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendme by the shareholders was/were sufficient for approval.	nt(s)
The amendment(s) was/were approved by the shareholders through voting groups. The following state must be separately provided for each voting group entitled to vote separately on the amendment(s):	zment
"The number of votes cast for the amendment(s) was/were sufficient for approval-	
by" (voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	older
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
DatedFeb 13. 2014	
Signature Muli Dule	
(By a director, president or other officer - if directors or officers have not be	
selected, by an incorporator – if in the hands of a receiver, trustee, or other cappointed fiduciary by that fiduciary)	ourt
Malt. Pack	
(Typed or printed name of person signing)	
Plesident	
(Title of person signing)	