P01000110516

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Amend 10 9.18,13

COVER LETTER

TO: Amendment Section Division of Corporations

MIAMIG	ROCERS INC
NAME OF CORPORATION: MIAMI GOOCUMENT NUMBER: P01000110	516
DOCUMENT NUMBER: 1 0 1000 1 10	<u> </u>
The enclosed Articles of Amendment and fee are	e submitted for filing.
Please return all correspondence concerning this	matter to the following:
Odalys M. Ibral	him, Esquire
	Name of Contact Person
IBRAHIM LAW	, P.A.
	Firm/ Company
11200 PINES E	BOULEVARD SUITE 200
	Address
PEMBROKE P	INES, FLORIDA 33026
	City/ State and Zip Code
OIBRAHIM@IBRA	HIMLAWPA.COM
	be used for future annual report notification)
For further information concerning this matter, p	please call:
ODALYS IBRAHIM	954 438-8393
Name of Contact Person	at (954) 438-8393 Area Code & Daytime Telephone Number
	, ,
Enclosed is a check for the following amount ma	ide payable to the Florida Department of State:
\$35 Filing Fee Certificate of Statu	
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



MIAMI GROCERS INC

(Name of Corporation as curren	itly filed wit	h the Flor	rida Dept. of St	<u>ite</u>)		- ~~~ <i>\\$</i>
P0100	0011	05	516			·
(Document Numb	per of Corpor	ation (if k	nown)			-
Pursuant to the provisions of section 607.1006, Fits Articles of Incorporation:	lorida Statut	es, this <i>Fl</i>	orida Profit Cor	poration add	pts the followin	g amendment(s) to
A. If amending name, enter the new name of t	the corporat	ion:)_			m)
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "word "chartered," "professional association," o	Corp," "Inc	poration, '	"company," o			
B. Enter new principal office address, if appli (Principal office address <u>MUST BE A STREET</u>)	N	A		-
						-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	<u>E BOX</u>)		N	A		-
					• • •	-
D. If amending the registered agent and/or re new registered agent and/or the new registered.			s in Florida, en	ter the name	of the	
	ereu omice s	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				
Name of New Registered Agent	N	 M				
	(Fle	orida street	address)	<u></u>		
New Registered Office Address:	N	A	- 	, Florida		
New Registerea Office Address:		(City)		, r iorida	(Zip Code)	_
New Registered Agent's Signature, if changing						
I hereby accept the appointment as registered ag	ent. I am fa		h and accept the	obligations	of the position.	
	N	A				
Signature	of New Regi	stered Age	ent, if changing			

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 <math>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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	5	Gino DENIS	5299 NE 2nd Avenue
Add			MIAMI FC 33137
Remove			
2) Change		_	
Add			
Remove			
3) Change			
Add			·
Remove			· · · · · · · · · · · · · · · · · · ·
4) Change	<u> </u>		
Add			
Remove			
5) Change			
Add			
Remove			·
6) Change			
Add			
Remove			

If amending or adding additional Art (Attach additional sheets, if necessary).	. (Be specific)
	NONE
	
If an area of the second secon	
provisions for implementing the am	change, reclassification, or cancellation of issued shares, nendment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
N	JONE

The date of each amendment(s) adoption: August 26, 2013 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 amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated August 26, 2013	
Signature By a director, president or other officer – if directors or officers 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)	
President	_ _
(Title of person signing)	