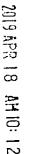
| (Requ | uestor's Name) | |
|----------------------------|------------------|--------------|
| (Addi | ess) | |
| (Addi | ress) | |
| (City/ | State/Zip/Phone | e #) |
| (Oit), | Otate/Lip/1 Hone | - π <i>)</i> |
| PICK-UP | MAIT | MAIL |
| (Rusi | ness Entity Nan | ne) |
| (Dusi | ness Chary Nan | ne, |
| (Doc | urnent Number) | |
| | | |
| Certified Copies | Certificates | of Status |
| | | |
| Special Instructions to Fi | ling Officer: | ! |
| | | ı |
| | | ı |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

Office Use Only



000327957910

04/18/19--01022--015 **52.50



C GOLDEN ADR 27 2019

COVER LETTER

TO: Amendment Section
Division of Corporations

| NAME OF CORPORATION: BEST CHOICE N | UTS, CANDY, & SPECIAI | LITIES, INC. | | | |
|--|--|--|--|--|--|
| DOCUMENT NUMBER: P02000039881 | ··· | | | | |
| The enclosed Articles of Amendment and fee are su | ibmitted for filing. | | | | |
| Please return all correspondence concerning this ma | atter to the following: | | | | |
| JITU BANKER | | | | | |
| | Name of Contact Person | | | | |
| M LINE HOLDINGS, INC. | | | | | |
| | Firm/ Company | | | | |
| 4701 TELLER AVENUE, SUITE 101 | | | | | |
| | Address | · | | | |
| NEWPORT BEACH CA 9 | 2660 | | | | |
| | City/ State and Zip Code | | | | |
| jbanker@mlineholdings.com | | | | | |
| · · · · · · · · · · · · · · · · · · · | sed for future annual report i | Natification) | | | |
| is man address, (to be a | sed for fatare annual report i | ionication, | | | |
| For further information concerning this matter, pleas | se call: | | | | |
| www. www. C | | | | | |
| JITU BANKER | at (⁷¹⁴ | _) 348 1470 | | | |
| Name of Contact Person | Area Coc | le & Daytime Telephone Number | | | |
| Enclosed is a check for the following amount made | payable to the Florida Depai | rtment of State; | | | |
| ■ \$35 Filing Fee □\$43.75 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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Divísion Clifton | Address nent Section of Corporations Building cecutive Center Circle | | | |

Tallahassee, FL 32301

BEST CHOICE FOOD & BEVERAGE, LLC P O Box 560455 Orlando, FL 328560455

Telephone: Cell. (813) 407 9976

January 29, 2019

Attn. Irene Albritton, Regulatory Specialist II Florida Department of State Division of Corporations P O Box 6327 Tallahassee, FL 32314

Dear Ms. Albritton

I refer to your letter addressed to Best Choice Nuts, Candy and Specialities, Inc. in connection with their request to have the name of their company changed to that of BEST CHOICE FOOD & BEVERAGE, INC.

I would advise you that I have no objection to your granting them approval for their name to be changed to that of Best Choice Food & Beverage, Inc.

I would be pleased to assist you should you require any further information.

RUSSELL RICKSON

Copy:

1. Best Choice Nuts, Candy, Nuts & Specialities, Inc., 549 W Grant Street, # 14, Orlando, FL 32805

2. M Line Holdings, Inc., 4701 Teller Avenue, Newport Beach, Ste. 101, CA 92660



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 7, 2019

JITU BANKER M LINE HOLDINGS, INC. 4701 TELLER AVENUE - STE. 101 NEWPORT BEACH, CA 92660

SUBJECT: BEST CHOICE NUTS, CANDY & SPECIALTIES INC.

Ref. Number: P02000039881

We have received your document for BEST CHOICE NUTS, CANDY & SPECIALTIES 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 title(s) following http://dos.n | NIXIE | 910, DO 1 RETURN TO SENI DELIVERABLE AS UNABLE TO FOR | ADDRESSED | | refer to the nformation. |
|-------------------------------------|---------------|---|------------------|----|--------------------------|
| abbreviatio | BC: 323 | 14632727 2347 | N013171-0287 | 26 | |
| The name | եպո | illiaddillillightidillightia om the name of an ex | tara dalamanta 🗀 | | ame as, or |
| it is not distingt | TISHIONIA III | on the name of an ex | asing entity. | | |

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L16000012843 - BEST CHOICE FOOD & BEVERAGE, LLC.

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.

Regulatory Specialist II

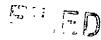
19 JAN 17 AN III: 5 PRESCRIPTION

10 JAN 17 AN I

Irene Albritton

Letter Number: 119A00000428

Articles of Amendment to Articles of Incorporation of



BEST CHOICE NUTS, CANDY, & SPECIALITIES, INC. (Name of Corporation as currently filed with the Florida Dept. of State) PO2000039881 (Document Number of Corporation (if known) Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: BEST CHOICE FOOD & BEVERAGE, INC. name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 460, 27TH STREET B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) ORLANDO, FL 32806 C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) N/A New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: \overline{Ihere} by accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, 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 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: XChange | PT Jo | ohn Doe | |
|----------------------------|---------------------|-----------------|-------------------------|
| X Remove | <u>V</u> <u>M</u> | like Jones | |
| X Add | <u>SV</u> <u>S:</u> | ally Smith | |
| Type of Action (Check One) | <u>Title</u> | Name | <u>Addres</u> s |
| 1) Change | Р | RICKON, RUSSELL | 460, 27TH STREET |
| X Add | | | ORLANDO |
| Remove | | | FLORIDA 32806 |
| 2) Change | D | ANISH, ANTONY | 4701 TELLER AVENUE, |
| X Add | | | NEWPORT BEACH, CA 92660 |
| Remove | | | |
| 3) Change | D | JITU BANKER | 4701 TELLER AVENUE. |
| XAdd | | | NEWPORT BEACH, CA 92660 |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) |
|---|
| NAME CHANGE AS FOLLOWS: |
| BEST CHOICE FOOD & BEVERAGE, INC. |
| · · · · · · · · · · · · · · · · · · · |
| AS REQUESTED BY MS. IRENE ALBRITTON, REGULATORY SPECIALIST, I HAVE ATTACHED A LETTER FROM |
| BEST CHOICE FOOD & BEVERAGE, INC., PERMITTING US TO CHANGE THE NAME OF THIS ENTITY TO THAT |
| OF BEST CHOICE FOOD & BEVERAGE, INC. |
| A COPY OF YOUR LETTER DATED JAN. 17, 2019 ATTACHED. |
| |
| |
| |
| |
| |
| |
| |
| |
| F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, |
| provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) |
| N/A |
| |
| |
| |
| |
| |
| |
| |

| | DECEMBER 19, 2018 | |
|---|---|---------------------------|
| The date of each amendment(s date this document was signed. |) adoption: | , if other than the |
| L | DECEMBER 19, 2018 | |
| Effective date <u>if applicable</u> : | 1 00 1 6 1 01 1 | |
| • | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in the document's effective date on the | is block does not meet the applicable statutory filing requirements, this date Department of State's records. | will not be listed as the |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| The amendment(s) was/were by the shareholders was/were | adopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval. | |
| | approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s): | |
| "The number of votes c | ast for the amendment(s) was/were sufficient for approval | |
| by | (voting group) | |
| , | (voting group) | |
| ☐ The amendment(s) was/were action was not required. | adopted by the board of directors without shareholder action and shareholder | |
| The amendment(s) was/were action was not required. | adopted by the incorporators without shareholder action and shareholder | |
| APRIL Dated | 16, 2016 | |
| C' | | |
| sele | a director, president or other officer – if directors or officers have not been eted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary) | |
| | JITU BANKER | |
| | (Typed or printed name of person signing) | |
| | DIRECTOR | |
| | (Title of person signing) | |