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| (Re | equestor's Name) | | | |
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| (Ac | ldress) | | | |
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| (Cir | ty/State/Zip/Phone | e #) | | |
| PICK-UP | WAIT | MAIL | | |
| (Bu | siness Entity Nar | me) | | |
| (Document Number) | | | | |
| Certified Copies | Certificates | s of Status | | |
| Special Instructions to | Filing Officer: | | | |
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Office Use Only



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And

AUG: 11 4 20143

R. WHITE

COVER LETTER

TO: Amendment Section

Mailing Address

P.O. Box 6327

Amendment Section

Division of Corporations

Tallahassee, FL 32314

| Division of Corporations |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| NAME OF CORPORATION: CULTIVARY CONVENIENCE TRAD DOCUMENT NUMBER: POZODOO 93070 |
| The enclosed Articles of Amendment and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| Name of Contact Person CULINARY CONSENSENCE Firm/ Company 2212 So. Andrews Are # 4 Address FT. LANDER DAKE FL 33316 City/ State and Zip Code * Culinary Convenience @ Outlook.com E-mail/address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| LIMOR MICHAELS at (954) 525-0011 Name of Contact Person Area Code & Daytime Telephone Number |
| Enclosed is a check for the following amount made payable to the Florida Department of State: |
| \$35 Filing Fee Certificate of Status Certificate of Status Certified Copy Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) |

Street Address

Clifton Building

Amendment Section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to

| | of | , | _ | |
|------------------------------------------------------------------------------------------|---------------------------------------|-----------------------------|--------------------|-----------------|
| CULINARY | CONVEL | DIENCE , | TNC | |
| (Name of Corporation as cu | rrently filed with the Flor | ida Dept. of State) | | |
| Vo_{2} | 200009 | 3070 | | |
| (Document N | Number of Corporation (if kr | nown) | · · · · · | |
| Pursuant to the provisions of section 607.100 its Articles of Incorporation: | 06, Florida Statutes, this <i>Flo</i> | rida Profit Corporation add | opts the following | amendment(s) to |
| A. If amending name, enter the new name | e of the corporation: | | | |
| name must be distinguishable and contain | al | u | | The new |
| "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association | on "Corp," "Inc," or "Co | ". A professional corporate | | |
| B. Enter new principal office address, if a (Principal office address MUST BE A STR | | | | |
| | - | | | |
| C. Enter new mailing address, if applical (Mailing address MAY BE A POST OF | ble: FICE BOX) | | | |
| | | | | |
| | - | | | |
| | | | | |
| D. If amending the registered agent and/o new registered agent and/or the new r | | in Florida, enter the name | e of the | |
| Name of N. D. St. 14 | | | | |
| Name of New Registered Agent | | | | |
| _ | (Florida street | address) | | |
| New Registered Office Address: | | , Florida | | |
| | (City) | | (Zip Code) | |
| | | | | |

New Registered Agent's Signature, if changing Registered Agent:

I hereby 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: 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) | <u>Title</u> | <u>Name</u> | | <u>Addres</u> s | |
| 1) Change | CEO | LIMO | or MICHAEL | 5 1755 NE 16 Ft. LAZden FL - 333 | th St |
| Add | | | | Ft. LAZden | : dala |
| Remove | | | | FL - 333 | 304 |
| 2) Change | | | | | |
| Add | | | | | |
| Remove | | | | | |
| 3) Change | | · | | | |
| Add | | | | | |
| 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) |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| AMENO ARTICLE TO READ |
| LIMOR MICHAELS TO OWN 51% |
| CONTROLLING INTEREST IN CORP |
| AND AARON MICHAELS TO OUN |
| REMAINING 49% OF STOCK/OWNERSHI |
| |
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| 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) CONTACOEO IN AMELOMENT |
| |
| ITSELF |
| |
| |
| |
| |
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| |

| The date of each amendment(s) adoption: | , if other than th |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|
| date this document was signed. | |
| Effective date if applicable: 7/3/14 | |
| (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 7/23/14 Signature X | |
| (By a director, president of 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) | _ |