## P0500059917

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: J&JPE.	ANUT, INC
DOCUMENT NUMBER: P0500005991	7
The enclosed Articles of Amendment and	
Please return all correspondence concerning	g this matter to the following:
JEFFREY BEAUC	НАМР
	Name of Contact Person
BEAUCHAMP & I	EDWARDS CPA
	Firm/ Company
PO BOX 1777	
	Address
CHIEFLAND, FL 3	32644
	City/ State and Zip Code
JEFFREY@BEAUCHAN	MPEDWARDSCPA.COM
E-mail address:	(to be used for future annual report notification)
For further information concerning this ma	tter, please call:
JEFFREY BEAUCHAMP	at (352) 493-4808  Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amou	int made payable to the Florida Department of State:
\$35 Filing Fee \$43.75 Filing Certificate of	
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

J & J PEANUT, INC	
(Name of Corporation	ion as currently filed with the Florida Dept. of State)
P05000059917	
(Docum	nent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the co	orporation:
	The new
	rd "corporation," "company," or "incorporated" or the abbreviation o," "Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
B. Enter new principal office address, if applicable	
(Principal office address <u>MUST BE A STREET ADD</u>	
	- ST O M
C. Enter new mailing address, if applicable:	The second secon
(Mailing address MAY BE A POST OFFICE BO)	)X)
	72
D. If amending the registered agent and/or register new registered agent and/or the new registered of	
Name of New Registered Agent	
	(Florida street address)
New Polymord Office All	
New Registered Office Address:	, Florida (City) (Zip Code)
New Registered Agent's Signature, if changing Regi	zistered Agent:
I hereby accept the appointment as registered agent.	I am familiar with and accept the obligations of the position.
Cinu	nature of New Registered Agent, if changing
Signo	muie of then registered regent, 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	S	ANITA LYNN JORDAN	16770 NW 160TH ST
Add			TRENTON, FL 32693
X Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	icles, enter change(s) he (Be specific)			
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		<del></del>		
		<u> </u>		
an amendment provides for an exch	nange, reclassification, o	r cancellation of issu-	ed shares,	
provisions for implementing the ame	nament if not contained	in the amendment it	seii:	
(if not applicable, indicate $N/A$ )				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)			·	
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				

The date of each amendment(s) adoption:, if other than
date this document was signed.
Effective date if applicable:  (no more than 90 days after amendment file date)
(no more inan 90 days after amenament fite date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.
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)
(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 12-5-16 Signature Robert Colon
(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)
ROBERT JORDAN
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)