| (Requestor's Name) | | | |
|---|--|--|--|
| (Address) | | | |
| (Address) | | | |
| (City/State/Zip/Phone #) | | | |
| PICK-UP WAIT MAIL | | | |
| (Business Entity Name) | | | |
| (Document Number) | | | |
| Certified Copies Certificates of Status | | | |
| Special Instructions to Filing Officer: | | | |
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Office Use Only



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O7 APR -9 AM 2: 32
SECRETARY OF STATE
TALLAHASSEE FLORIDA

27/10/

COVER LETTER

TO: Amendment Section

Tallahassee, FL 32314

| · Division of Co | orporations | | |
|--|--|--|---|
| NAME OF CORP | ORATION: JOEL'S | s Mini M | ARKET INC. |
| DOCUMENT NU | MBER: 107000 | 0 22 536 | |
| The enclosed Artic | les of Amendment and fee a | re submitted for filing. | |
| Please return all co | rrespondence concerning thi | s matter to the following: | |
| | JOEL J. | omo LCA | |
| | (Name o | of Contact Person) | |
| | JOEL'S AFIR |)/N/ VARKET, m/Company) | LNC. |
| | 574 E. S | (Address) | |
| | HINLEPH F | tate and Zip Code) | |
| | (City/ St | tate and Zip Code) | |
| For further informa | tion concerning this matter, | please call: | |
| JOEL | JomoLCA | at (305) 363. | - 0305 |
| (Name | of Contact Person) | (Area Code & Daytim | e Telephone Number) |
| Enclosed is a check | for the following amount: | | |
| □\$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 | | Street Address Amendment Section Division of Corporations Clifton Building | |

2661 Executive Center Circle

Tallahassee, FL 32301

March 29, 2007

JOEL JOMOLCA 574 E 21 ST HIALEAH, FL 33010

SUBJECT: JOEL'S MINI MARKET, INC. Ref. Number: P07000022536

07 APR -9 AM 8: 00

We have received your document for JOEL'S MINI MARKET, 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 date of adoption of each amendment must be included in the document.

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) 245-6927.

Tracy Smith
Document Specialist

Letter Number: 707A00021531

| • | A | rticles of Amendm | ent | 3% X |
|-----------------------------|---------------------|----------------------------------|-----------------------------|--|
| | A.e. | to ticles of Incorpora | rtion | Con the second |
| < | \triangle | eries of theorpus | | 7770 |
| WELS | $= \{i\}_{i}$ | Ni / MAX | | |
| (Na | me of corporation a | as currently filed with t | he Florida Dept. of St | ate) |
| $\mathcal{O}_{\mathcal{E}}$ | (/ /) | 000 | | |
| | 10006.2 | 2536 at number of corporation | | |
| | (Documen | a humber of corporation | n (if known) | |
| uant to the provision | s of section 607. | .1006, Florida Statu | ites, this <i>Florida I</i> | rofit Corporation |
| ots the following ame | indment(s) to its | Articles of Incorpo | mation: | |
| V CORPORATE N | AME (if change | ng): | | |
| Cont | EAmily | SUPPLIER | 3 TATE | |
| t contain the word "corpo | oration," "comment. | " or "incorporated" or | the abbreviation "Con | o" "Inc.," or "Co." |
| ofessional corporation m | ust contain the won | d "chartered". "professi | ional association." or | the abbreviation "P.A." |
| | | | | - |
| PATRAGE PER A SOL | 00000 (A)00000 | | ···· | 4 - 4 - 7 - 7 - 7 |
| ENDMENTS ADOI | | | • | e Article Number(s |
| or Article Title(s) be | ing amended, ad | ded or deleted: (BF | SPECIFIC) | |
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| | (Attac | h additional pages if ne | oessary) | |
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| amendment provide | s for exchange, 1 | reclassification, or | cancellation of iss | ued shares, provision applicable, indicate |
| amendment provide | s for exchange, 1 | reclassification, or | cancellation of iss | ued shares, provision applicable, indicate |
| amendment provide | s for exchange, 1 | reclassification, or | cancellation of iss | ued shares, provision applicable, indicate |
| amendment provide | s for exchange, 1 | reclassification, or | cancellation of iss | ued shares, provision applicable, indicate |

(continued)

| The distant could amond a successive and | (13-23-201) |
|--|--|
| The date of each amendment(s) ad | opues: |
| Effective date if applicable: | |
| (no un | ore than 90 days after amendment file date) |
| Adoption of Amendment(s) | (CHECK ONE) |
| | vere approved by the shareholders. The number of votes cast for shareholders was/were sufficient for approval. |
| * * | rere approved by the shareholders through voting groups. The be separately provided for each voting group entitled to vote ment(s): |
| *The number of votes | cast for the amendment(s) was/were sufficient for approval by |
| { | voting group) |
| The amendment(s) was/w and shareholder action was | vere adopted by the board of directors without shareholder action as not required. |
| The amendment(s) was/w shareholder action was no | rere adopted by the incorporators without shareholder action and of required. |
| Signatur | A |
| (By a director selected 189 | president of other officer - if directors or officers have not been principally in the liands of a receiver, trustee, or other court inciary by that fiduciary) JOEL OMILCA |
| | (Typed or printed name of person signing) |
| | PRESIDENT |
| | (Title of person signing) |

FILING FEE: \$35