## P07000121645

(Requestor's Name)
(Address)
(Address)
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(City/Chata/Zin/Dhana 40
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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Special Instructions to Filing Officer:





900210424049

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## **COVER LETTER**

TO: Amendment Section Division of Corporations					
SUBJECT: JONES EZ FOODS INC.  Name of Corporation					
DOCUMENT NUMBER: \$ 07000121645					
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Andre W. Jones Name of Contact Person					
Jones Ez Foods, Inc.					
4630 Sandalword Drive					
Labelle, fl 33935  City/State and Zip Code					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:    Area Code & Daytime Telephone Number   Area Code & Daytime Telephone Number   Area Code   Area Cod					

Enclosed is a \$35.00 check made payable to the Department of State.

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

## **COVER LETTER**

TO: Amendment So Division of Co			
NAME OF CORP	ORATION: JON	es Ez Foods	E. Inc.
DOCUMENT NU	MBER: <u>PD700</u>	012/645	
The enclosed Articl	es of Amendment and fee a	are submitted for filing.	
Please return all cor	respondence concerning thi	is matter to the following:	
-	Andre L	U. Jones Jame of Contact Person	, , , , , , , , , , , , , , , , , , ,
· _	Jones E	2 Foxeds, RnC	<u>/</u>
-	4630 Sar	Address Dr.	ve_
_	La Belle,	H 33935 ity/ State and Zip Code	
ir	FO @ JONESEZ E-mail address: (to be use	bbg. Com d for future annual report notification)	
Vickie	tion concerning this matter,  of Contact Person	please call:at (954) 275_ Area Code & Daytime Tel	40/10·
Enclosed is a check	for the following amount n	nade payable to the Florida Depar	tment 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 Ad		Street Address	
Amendment Section		Amendment Section Division of Corporations	
Division of Corporations P.O. Box 6327		Clifton Building	

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment to
Articles of Incorporation
of 8
Jones Ez Foods, Inc.
(Name of Corporation as currently filed with the Florida Dept. of State)
<u> </u>
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
Tonesez BBO Too
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."
B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)  Bradenton, A = 5
21/201
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  505 (1): Hick and hee APOST OFFICE BOX)
(Mailing address MAY BE A POST OFFICE BOX)
labelle, R
3393
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: HMYE W. JONES, FL
HO30 Candalulord Drive
New Registered Office Address: (Florida street address)
1 a Rella. 32020
(City), Florida (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.
, and accept the conganions of the position.
Signature of New Registered Agent, if changing
Signature of frew Registered Agent, if changing

(Attach addi	itional sheets, if necessary)		
Title	Andre W. Jones, I	Address 4630 Sandalw Labelle, Rc	Type of Action  Add  Remove
PO_	Andre W. Jones	4630 Sandalu tabelle, R.	Add Remove
Olve	Andre W. Jones	4630 Surda/W 12 Sc/18, R 3393	Add Remove
	ling or adding additional Articles, enter dditional sheets, if necessary). (Be speci		,
P-H1	ndre W. Jones, I	I = 80 (n S	umber of) haves
OVP-	Andre W. Jones =	20 (ni	umber of) Shares
provisio	nendment provides for an exchange, recons for implementing the amendment if of applicable, indicate N/A)		
Pur	pose / Article	2 III = RE	staurant

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:

The date of each amondment(s) adore	8/4/2011
The date of each amendment(s) adoptions of the date of each amendment(s) adoptions.  Effective date if applicable:	(date of adoption is required)
(no mo	re than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopted by the shareholders was/were suffice.	ed by the shareholders. The number of votes cast for the amendment(s) cient for approval.
The amendment(s) was/were appromust be separately provided for each	ved by the shareholders through voting groups. The following statement ch 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	group) ."
The amendment(s) was/were adopte action was not required.	ed by the board of directors without shareholder action and shareholder
The amendment(s) was/were adopte action was not required.	ed by the incorporators without shareholder action and shareholder
Dated SH	20H
Signature (By Adirect	or, 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 duciary by that fiduciary)
appointed in	(Typed or printed name of person signing)
<del></del>	(Title of person signing)