# 70800073112

| (Requ                      | iestor's Name)  |             |
|----------------------------|-----------------|-------------|
| (Addr                      | ess)            |             |
| (Addr                      | ess)            |             |
| (City/                     | State/Zip/Phone | e #)        |
| PICK-UP                    | ☐ WAIT          | MAIL        |
| (Busi                      | ness Entity Nar | ne)         |
| (Docu                      | ıment Number)   |             |
| Certified Copies           | Certificates    | s of Status |
| Special Instructions to Fi | ing Officer:    |             |
|                            |                 |             |
|                            |                 |             |
|                            |                 |             |
|                            |                 |             |

Office Use Only

3/5/10



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02/24/10--01020--019 \*\*35.00

2010 HAR -4 PH 4: 42

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPO          | DRATION: MORE 4 LA   | ESS GROCERY STORE  | INC   |
|------------------------|--|--|---|
| DOCUMENT NUM           | 1BER: P08000073  | 112  |   |
| The enclosed Article   | es of Amendment and fee are sul  | bmitted for filing.  |   |
| Please return all corr | espondence concerning this mat   | tter to the following:   |   |
|                        | MIGUEL   | CORT 150   |   |
|                        | (Name of   | Contact Person)  |   |
|                        | (Firm  | n/ Company)  |   |
|                        | 4119 TEE RD  | •  |   |
|                        | (.   | Address)   |   |
| <del></del>            | SARAS  | OTA, FL 34235  |   |
|                        | (City/ Sta   | te and Zip Code)   |   |
| <del></del>            | E-mail address: (to be use   | d for future annual report notification  | ation)  |
| For further informati  | on concerning this matter, pleas   | e call:  |   |
| MIGUEL                 | - CORTIJO  | at ( <u>941</u> ) <u>400</u><br>(Area Code & Daytir  | 7110  |
| (Name                  | e of Contact Person)   | (Area Code & Daytir  | ne Telephone Number)  |
| Enclosed is a check t  | for the following amount made p  | payable to the Florida Department  | 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<br>Certificate of Status<br>Certified Copy<br>(Additional Copy<br>is enclosed) |
| Ame<br>Divis<br>P.O.   | ing Address Indment Section Ission of Corporations Box 6327 Industrial House, FL 32314 | Street Address Amendment Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301 | · Circle  |

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

ينام الماسية

| NAME OF CORP                                     | ORATION: MORE 4 1                          | LESS GROCERY STORE   | EINC  |
|--|--|--|---|
| DOCUMENT NUI                                     | MBER: P080000                              | 73112  |   |
| The enclosed Articl                              | es of Amendment and fee a                  | are submitted for filing.  |   |
| Please return all cor                            | respondence concerning th                  | is matter to the following:  |   |
| _  | Mı   | WEL CORTIJO  |   |
|  | N  | Name of Contact Person   | <del>.</del>  |
| _  |  | Firm/ Company  | · • • • • • • • • • • • • • • • • • • •   |
| e'   | 4112 TEE                                   | RD   |   |
| _  |  | Address  |   |
| _  | SARASOT                                    | <del></del>  | <del></del>   |
|  | MOORT                                      | ity/ State and Zip Code  TO @ COM CAST. Note of the for future annual report notification)                                   | <u>et</u>   |
| For further informat                             | ion concerning this matter,                | please call:   |   |
| <del></del>                                      | CORTIJO                                    | at ( <u>941</u> ) 400 -  | - 7110  |
|  |  | nade payable to the Florida Depar  | ,   |
| \$35 Filing Fee                                  | \$43.75 Filing Fee & Certificate of Status | \$\int \\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)  | \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Amendment Division of OP.O. Box 63: Tallahassee, | Section<br>Corporations<br>27              | Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circl Tallahassee, FL 32301 | e   |

#### **Articles of Amendment** to · **Articles of Incorporation**

## MORE 4 LESS GROCERY STORE INC

Ť

# P08000073112

|  | •   |                                   |                             |
|--|---|-----------------------------------|-----------------------------|
|  | Articles of A   | mendment                          | <b>A</b> .                  |
|  | to  | •                                 | FILE                        |
|  | Articles of Inc   | corporation                       | 2010 11 11 11 11            |
|  | ` of  |                                   | MAR                         |
| MORE   | 4 LESS GROCERY  | STORE INC                         | _ PM                        |
| (Name of   | Corporation as currently filed with                             | the Florida Dept. of State)       | 14ASEX 06 4:42              |
|  | P080007   | 3112                              | E. FLORE                    |
|  | (Document Number of Corpora                                     | tion (if known)                   |                             |
| Pursuant to the provision mendment(s) to its Artic | ns of section 607.1006, Florida Statu<br>cles of Incorporation: | ites, this Florida Profit Corpor  | ration adopts the following |
| A. If amending name, o                             | enter the new name of the corporati                             | <u>on:</u>                        |                             |
|  |   |                                   | The new                     |
| iame must be distingu                              | ishable and contain the word "cor                               | poration," "company," or "i       | ncorporated" or the         |
| abbreviation "Corp.," "                            | Inc.," or Co.," or the designation "C                           | Corp;""-"Inc;"-or-"Co": A*pro     | fessional corporation       |
| ame must contain the w                             | ord "chartered," "professional assoc                            |                                   |                             |
|  | office address, if applicable:                                  | 560 N. WASHINGTO                  | NBWD.ONIT A                 |
| Principal office address                           | <u> MUST BE A STREET ADDRESS</u> )                              | SARASOTA, FL 30                   | 1236                        |
|  |   | STIER SOTA, CO                    |                             |
|  |   |                                   |                             |
| C. Enter new mailing                               | address, if applicable:   | The statement                     | OLIBUIN DAIT A              |
|  | AY BE A POST OFFICE BOX)  | 560 N. WASHINGTI                  | 20000                       |
|  |   | SARASOTA, FL 34                   | 723 <u>6</u>                |
|  |   |                                   |                             |
| ) If amending the reg                              | istered agent and/or registered offic                           | e address in Florida, enter the   | name of the                 |
|  | it and/or the new registered office ac                          |                                   |                             |
| Name o <u>f New Re</u>                             | paistaned Agent: FERNA  | NDO TORRES                        |                             |
| <u>Nume of New Re</u>                              |   | NASHINGTON BLUD                   | CONTA                       |
| Maria Danisharan J.                                |   | NASHINGIUN DEVE                   | 3.0/41171                   |
| <u>New Registered (</u>                            | · · · · · · · · · · · · · · · · · · ·                           | rida street address)              | 21020                       |
|  | SARAS   |                                   | rida_54256                  |
|  | (City   | (Zip Code                         | e)                          |
| New Registered Agent's                             | s Signature, if changing Registered                             | Agent:                            |                             |
| I hereby accept the appo                           | intment as registered agent. I am fan                           | viliar with and accept the obliga | ations of the position.     |
|  | 7   | 8-10-                             |                             |
|  | Signature of He   | w Registered Agent, if changing   | <del></del>                 |
|  |   |                                   |                             |

Page 1 of 3

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)

riec.

4

N.C.

| <u>Title</u> | <u>Name</u>   | Address   | Type of Action             |
|--------------|---|---|----------------------------|
| <u>P</u>     | CARLOS S. CHAVEZ  | 1725 FIRST ST. E.<br>BRADENTON FL34208                                    | ☐ Add<br>☑ <b>风</b> Remove |
|              |   |   | _ ☐ Add<br>_ ☐ Remove      |
|              |   |   |                            |
|              | nding or adding additional Articles, enter<br>additional sheets, if necessary). (Be spec                    |   | ,                          |
| * OI         | FFICER / DIRECTOR DE  | TAIL  |                            |
| THE          | NEW ADDRESS OF TH   | IE VP FERNANDO  | TORRES IS                  |
| *            | 407 Benevi  |   |                            |
|              | SARASOTA, F   | FL 34233  |                            |
|              |   |   |                            |
|              |   |   |                            |
| ·            |   |   |                            |
| provis       | amendment provides for an exchange, resions for implementing the amendment it not applicable, indicate N/A) | classification, or cancellation of is<br>f not contained in the amendment | sued shares,<br>itself:    |
|              | ک   | P   |                            |
|              | •   |   |                            |
|              |   |   |                            |
|              |   |   | <u> </u>                   |
|              |   |   |                            |

| The date of each amendment(s) a                                | adoption:02/22/2010   |
|--|---|
| Tree 41 . 3.4 to 11 11   | (date of adoption is required)  |
| (no  | o more than 90 days after amendment file date)  |
| ga. Adoption of Amendment(s)                                   | (CHECK ONE)   |
| The amendment(s) was/were ac<br>by the shareholders was/were s | dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.  |
| The amendment(s) was/were ap                                   | oproved by the shareholders through voting groups. The following statement reach 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   | ting group)   |
| (voi   | ting group)   |
| The amendment(s) was/were ac action was not required.          | dopted by the board of directors without shareholder action and shareholder   |
| The amendment(s) was/were ac action was not required.          | dopted by the incorporators without shareholder action and shareholder  |
| Dated 02/2   | 2/2010  |
| (By a di   | rector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary) |
| _  | FERNANDO TORRES   |
|  | (Typed or printed name of person signing)   |
| _  | VICE- PRESIDENT   |
|  | (Title of person signing)   |