P09000036180

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SECRETARY OF STATE



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORI	PORATION:	Your Fondant Memories, I	nc
DOCUMENT NU	MBER:	P09000036180	
The enclosed Artic	cles of Amendment and fee a	re submitted for filing.	
Please return all co	orrespondence concerning thi	s matter to the following:	
		ndace M DiLorenzo ame of Contact Person	·
	•,	and of contact roson	
	Your F	Firm/ Company	
		4 T to D. t	
	51	4 Tangerine Drive Address	
	Olds	smar, Florida, 34677	
		ity/ State and Zip Code	
	your.fondant. E-mail address: (to be used	memories@gmail.com I for future annual report notification)	······································
For further informa	ation concerning this matter,	please call:	
Can	dace M DiLorenzo	at (727)542	-1421
Name	of Contact Person	Area Code & Daytime Telep	hone Number
Enclosed is a check	k for the following amount m	ade payable to the Florida Departm	ent 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)
P.O. Box 6	t Section Corporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Your Fondant Memorie	es, inc
(Name of Corporation as currently filed with	the Florida Dept. of State)
P09000036180	
(Document Number of Corporat	ion (if known)
Pursuant to the provisions of section 607.1006, Florida Statut amendment(s) to its Articles of Incorporation:	es, this Florida Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation	<u>n:</u>
	The new
name must be distinguishable and contain the word "corpabbreviation "Corp.," "Inc.," or Co.," or the designation "C name must contain the word "chartered," "professional associa	orp," "Inc," or "Co". A professional corporation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	

D. <u>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:</u>

Name of New Registered Agent:		
New Registered Office Address:	(Florida street a	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

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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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>VP</u>	Jamie A DiLorenzo	514 Tangerine Drive Oldsmar, Florida, 34677	
	· · · · · · · · · · · · · · · · · · ·		
	······································		
	dditional sheets, if necessary). (Be :		
provisi	mendment provides for an exchange ons for implementing the amendment applicable, indicate N/A)		
N/A	***************************************		

The date of each amendmen	t(s) adoption: April 1, 2010
Effective date <u>if applicable</u> :	(data of adoption is required)
g general be	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement ed 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/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated	1/15/2010
Signature _	Cardaa M. Riform
	a director, president or other officer - if directors or officers have not been
	ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	Candace M DiLorenzo
	(Typed or printed name of person signing)
	Director
	(Title of person signing)