## P090000037508

| (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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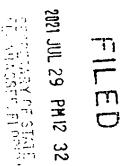
Office Use Only



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AUG 1 8 2021 A RAMSEY

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF COR  | PORATION: CALIFORNIA FO                       | ODS, CORP  |  |  |  |
|--|---|--|--|--|--|
| DOCUMENT NO  | DYVICYVIOLET                                  |  | ·  |  |  |
| The enclosed Arti  | cles of Amendment and fee are su              | ebmitted for filing.   |  |  |  |
| Please return all c  | orrespondence concerning this ma              | atter to the following:  |  |  |  |
|  | Norris Atesiano                               |  |  |  |  |
|  |   | Name of Contact Person   | n  |  |  |
| •  | Green Box Tax Services Corp                   |  |  |  |  |
|  |   | Firm/ Company  |  |  |  |
|  | 15715 S Dixie hwy Suite 211                   |  |  |  |  |
|  | <del></del>                                   | Address  |  |  |  |
|  | Miami FL 33157                                |  |  |  |  |
|  |   | City/ State and Zip Cod  | p)   |  |  |
|  |   | : -  | •  |  |  |
|  | admin@atesianotax.com                         |  |  |  |  |
|  | E-mail address: (to be us                     | sed for future annual report   | notification)  |  |  |
| For further inform   | nation concerning this matter, plea           | se call:   | ·  |  |  |
| Norris Atesiano  |   | at (   | 928-1137   |  |  |
| Name of Contact Person   |   | at (305 928-1137 Area Code & Daytime Telephone Number  |  |  |  |
| Enclosed is a chec   | ck for the following amount made              | payable to the Florida Dep   | artment of State:  |  |  |
| <b>\$35</b> Filing Fe  | e □\$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 Tallahassee, FL 32314 |   | Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 |  |  |  |

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

FILED

to

CALIFORNIA FOODS, CORP

2021 1111 20 000

| (Name of Company)   | Alu Glad with the Floride Dark of State                    |
|---|--|
| \ <u>\</u>  | tly filed with the Florida Dept. of State)                 |
| 109000087508  | ALLARISE TATE  |
| (Document Number of   | of Corporation (if known)                                  |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:   | Florida Profit Corporation adopts the following amendment( |
| A. If amending name, enter the new name of the corporation:   |  |
|   | The new  |
| name must be distinguishable and contain the word "corporation." ' "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A. | A professional corporation name must contain the word      |
| 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)  |  |
| <u> </u>  |  |
|   |  |
|   |  |
| D. If amending the registered agent and/or registered office add  | dross in Florida, enter the name of the                    |
| new registered agent and/or the new registered office addres  |  |
| Name of New Parking of Land   |  |
| Name of New Registered Agent  |  |
|   |  |
| (Florida st   | treet address)   |
| New Registered Office Address:  | Florida  |
|   | (City) (Zip Code)  |
|   |  |
|   |  |
| New Registered Agent's Signature, if changing Registered Agen<br>I hereby accept the appointment as registered agent. I am familiar   |  |
| r nevery accept the appointment as registered agent. I am juminar   | with and accept the configurous of the position.           |
|   |  |
|   |  |
| Signature of New I  | Registered Agent, if changing                              |
| Cheek if applicable   |  |

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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.

| X Change                      | <u>PT</u> | John Doe                     |                 |
|-------------------------------|-----------|------------------------------|-----------------|
| X Remove                      | <u>v</u>  | Mike Jones                   |                 |
| X Add                         | <u>sv</u> | Sally Smith                  |                 |
| Type of Action<br>(Check One) | Title     | <u>Name</u>                  | <u>Addres</u> s |
| 1) Change                     | V         | Danmarys Del Valle Rodriguez | 8162 NW 48 TER  |
| X Add                         |           |                              | DORAL, FL 33166 |
| Remove                        |           |                              |                 |
| 2) Change                     |           |                              |                 |
| Add                           |           |                              |                 |
| Remove 3 ) Change             |           | <u> </u>                     |                 |
| Add                           |           |                              |                 |
| Remove                        |           | ·                            |                 |
| 4) Change                     |           |                              |                 |
| Add                           |           |                              |                 |
| Remove                        |           |                              |                 |
| 5) Change                     |           |                              |                 |
| Add                           |           |                              |                 |
| Remove                        |           |                              |                 |
| 6) Change                     |           |                              |                 |
| Add                           |           |                              | <del></del>     |
| Remove                        | •         |                              |                 |

|  | (Be specific)  |
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| an amendment provides for an exchorovisions for implementing the ame (if not applicable, indicate N/A)       | hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |

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| The date of each amendment(s) a                                       | doption:   | , if other than the                        |
|---|--|--|
| date this document was signed. 07/ Effective date if applicable:      | 19/2021  |  |
| <u></u>   | (no more than 90 days after amendment file da  | ate)                                       |
| Note: If the date inserted in this document's effective date on the D | block does not meet the applicable statutory filing requirement of State's records.  | nents, this date will not be listed as the |
| Adoption of Amendment(s)  | ( <u>CHECK ONE</u> )   |  |
| The amendment(s) was/were ad<br>action was not required.              | opted by the incorporators, or board of directors without shar   | reholder action and shareholder            |
| ☐ The amendment(s) was/were ad<br>by the shareholders was/were s      | opted by the shareholders. The number of votes cast for the ufficient for approval.  | amendment(s)                               |
|   | proved by the shareholders through voting groups. The follor each voting group entitled to vote separately on the amends.  |  |
| "The number of votes cast   | for the amendment(s) was/were sufficient for approval  |  |
| by  |  |  |
|   | (voting group)   |  |
| 07/19/2021<br>Dated   |  |  |
| Signature 7   | celly stantor.   |  |
| (By a d   | irector, president of other officer – if directors or officers had, by an incorporator – if in the hands of a receiver, trustee, of the fiduciary by that fiduciary) |  |
|   | Freddy Aguilar   |  |
|   | (Typed or printed name of person signing)  |  |
|   | p  |  |
|   | (Title of person signing)  |  |

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