P09000101022

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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10 JUN 28 PM 2:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ACCEPTED
AND
FILED

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: DR ROSINA'S CORP

DOCUMENT NUMBER: P09000101022

The enclosed ***Articles of Amendment*** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ROSSY PELLERANO
Name of Contact Person

DR ROSINA'S CORP
Firm/ Company

6817 RIVIERA DRIVE
Address

CORAL GABLES FLORIDA 33146
City/ State and Zip Code

rosinapell@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ROSSY PELLERANO
Name of Contact Person

at (305) 632-1347
Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made 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 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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 17, 2010

ROSSY PELLERANO
6817 RIVIERA DR
CORAL GABLES, FL 33146

SUBJECT: DR. ROSINA'S CORP.
Ref. Number: P09000101022

We have received your document for DR. ROSINA'S CORP. 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 name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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) 245-6957.

Tracy L Lemieux
Regulatory Specialist II

Letter Number: 910A00014989

Articles of Amendment

to

Articles of Incorporation

of

(Name of Corporation as currently filed with the Florida Dept. of State)

DR ROSINA'S CORP

(Document Number of Corporation (if known)

P09000101022

Pursuant to the provisions of section 607.1006, Florida Statutes, this ***Florida Profit Corporation*** adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

Freedom to Eat'em INC.

The new 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)

7620 SW 87TH AVE, SUITE 208
MIAMI FLORIDA, 33173

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

6817 RIVIERA DR.
CORAL GABLES, FL 33146

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:

New Registered Office Address: *(Florida street address)* 7620 SW 87TH AVE, SUITE 208

MIAMI *(City)*, Florida *(Zip Code)* 33173

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

10 JUN 28 PM 2:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED AND FILED

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)

Title	Name	Address	Type of Action
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)

The date of each amendment(s) adoption: JUNE 8th 2010

Effective date if applicable:
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided 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/were adopted by the board of directors without shareholder action and shareholder action was not required.

☑ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated_ 6-8-2010

Signature _____
(By a director, 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 appointed fiduciary by that fiduciary)

ROSSY PELLERANO
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)