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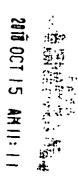
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COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: YOUR WHOLESALE RETAILER INC DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: HOWARD RICH Name of Contact Person Firm/ Company 9910 NW 45 ST Address CORAL SPRINGS, FL 33065 City/ State and Zip Code toprb1@aol.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (954) 415-4437
Area Code & Daytime Telephone Number **HOWARD RICH** Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee **□\$**43.75 Filing Fee & ☐\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassec, FL 32301

Articles of Amendment to Articles of Incorporation of



YOUR WHOLESALE RETAILER INC.

(Name o	of Corporation as currently filed with the F	lorida Dept. of State)
P10000013005		
	(Document Number of Corporation (if k	nown)
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006. Florida Statutes, this <i>Florida Profit Co</i>	rporation adopts the following amendment(s) to
A. If amending name, enter the new m	ame of the corporation:	
		The new
	tain the word "corporation," "company," nation "Corp," "Inc," or "Co". A profession," or the abbreviation "P.A."	
B. Enter new principal office address, (Principal office address MUST BE A S		
<u> </u>		
C. Enter new mailing address, if appli		
(Mailing address MAY BE A POST)	OFFICE BOX)	
		The state of the s
D. If amending the registered agent an	id/or registered office address in Florida, cr	ator the name of the
new registered agent and/or the new		iter the name of the
	HOWARD RICH	
Name of New Registered Agent		
	9910 NW 45 ST	
	(Florida street address)	
New Registered Office Address:	CORAL SPRINGS	. Florida 33065
	(Cip)	(Zip Code)
New Registered Agent's Signature, if c	hanging Registered Agent:	
l hereby accept the appointment as regist	ered agent. I am familiar with and accept th	e obligations of the position.
XX	mul Bat	
	Signature of New Registered Agent, i	f changing
		• • • •

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.

Example: X Change	<u>PT</u>	John Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	PVST	MATTHEW RICH	9910 NW 45 ST
Add X Remove			CORAL SPRINGS, FL 33065
2) Change	PVST	HOWARD RICH	9910 NW 45 ST
X Add			CORAL SPRINGS, FL 33065
Remove			•
3) Change			
Add			
Remove			
4) Change			<u></u>
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary).	ticles, enter cha (Be specific)				
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If an amendment provides for an exc provisions for implementing the am	:hange, reclassif	ication, or cance	llation of issued s	sharës,	
(if not applicable, indicate N/A)	Cudinent II (1000	.ontained in the a	antenament usen	<u>•</u>	
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The date of each amendment(s) adoption:	, if other than
date this document was signed.	
Effective date if applicable:	
Effective date if applicable: (no more than 90 days after umendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	ate will not be listed as
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statem must be separately provided for each voting group entitled to vote separately on the amendment(s):	ient
"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 sharehold action was not required.	ler
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
8/20/18	
Dated	
Signature X June Such	
(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 cou	ırt
appointed fiduciary by that fiduciary)	
HOWARD RICH (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
PRESIDENT (Title of person signing)	
(Title of person signing)	

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