P10000094538

(Re	equestor's Name)			
(Ad	ldress)			
(Ad	ldress)			
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
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Amend 11/30/11

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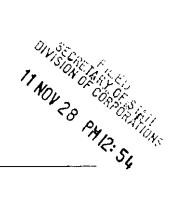
TO: Amendment Section **Division of Corporations**

> P.O. Box 6327 Tallahassee, FL 32314

NAME OF CORPORATION: GOVIA HEALTHY FOODS, INC.				
DOCUMENT NUMBER: P10000094538				
The enclosed Articles of	Amendment and fee are su	ibmitted for filing.		
Please return all correspo	ondence concerning this ma	atter to the following:		
<u>DORE</u>	L MITRUT	ame of Contact Person		
GOVI	A HEALTHY FOODS, INC	~		
<u> </u>	TIEADHT FOODS, INC	Firm/ Company	are among 4 proper agree 100	
950 NI	E 85TH STREET			
		Address		
MIAM	1, FL 33138	by State and Tin Code		
	Ci	ity/ State and Zip Code		
dorel@goviahealthyfoods.com E-mail address: (to be used for future annual report notification)				
	TAX PLANNERS, P.A. 15720 NORTHEAST COMMENTED THE MILE AMILE BEA 20-0275965	A.	416-1553) 9336553 de & Daytime Telephone Number	
Enclosed is a check for t	he following amount made	payable to the Florida Dep	artment 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)	
Ameno Divisio	g Address Iment Section on of Corporations ox 6327	Amend Divisio	Address Iment Section on of Corporations Building	

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



GOVIA HEALTHY FOODS, INC.			
(Name of Corporation as curr	ently filed with the Flo	orida Dept. of State	
210000094538			
(Document Nu	mber of Corporation (if	known)	
fursuant to the provisions of section 607.10 mendment(s) to its Articles of Incorporation:	06, Florida Statutes, thi	is <i>Florida Profit C</i>	Corporation adopts the following
. If amending name, enter the new name of	of the corporation:		
he new name must be distinguishable and co bbreviation "Corp.," "Inc.," or Co.," or th ame must contain the word "chartered," "pr	e designation "Corp."	"Inc." or "Co". A	professional corporation
3. Enter new principal office address, if app Principal office address <u>MUST BE A STREI</u>		950 N.E Miami, F.	. 85 STREET L. 33/38
Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)		GAME H	As ABOVE)
D. If amending the registered agent and/or new registered agent and/or the new reg Name of New Registered Agent:		ess in Florida, ente	r the name of the
New Registered Office Address:	(Fiorida stree 950 N. E. 85	a address) STAGET 1	Marray, Florida 33/38 (Zip Code)
	(City)		(Zip Code)
lew Registered Agent's Signature, if chang hereby accept the appointment as registered t	i <mark>ng Registered Agent:</mark> agent. I am familiar wi	ith and accept the o	bligations of the position.
Signatus	re of New Registered Ag	gent, if changing	

If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director.

(Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an

additional sheet)

Title(s)		Name	<u>Addre</u>	<u>ss</u>
1) <u>P/D</u>		DOREL MITRUT		85TH STREET I, FL 33138
2) <u>V/P</u>		ADRIAN BOLBOSE	9	50 N.C. 85 STREET DAG
3)				
4)				
5)				
5)		**************************************		
<u>If REMOVING</u>	an office	er and/or director, please list the t	itle(s) and name	of the officer/director to be removed:
Title(s)	Name		Title(s)	Name
1)			4)	
			5)	

E. <u>If amending or add</u> (attach additional sk	neets, if necessary).	(Be specific)	
Article IV	(N/A)		
Atticle 11			
3			
		·	
•			
		77.	

provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate NA) M&M EXP. ENTERPRISE, INC - 70 SHARES ADRIAN BOLBOSE - 30 SHARES The date of each amendment(s) adoption: 11/17/2011 Effective date if applicable: 11/17/2011 (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 (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 11 / 17 / 2011 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) DOREL MITRUT (Typed or printed name of person signing) **PRESIDENT**

F. If an amcodment provides for an exchange, reclassification, or cancellation of issued shares,

(Title of person signing)