P10000094538

| (Re | equestor's Name) | |
|-------------------------|--------------------|-------------|
| (Ad | ldress) | |
| (Ad | ldress) | |
| (Cit | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bı | ısiness Entity Nan | ne) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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And 105/3/12

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: GOVIA HEA | ALTHY FOODS | , INC. |
|--|--|---|
| DOCUMENT NUMBER: P10000094538 | | |
| The enclosed Articles of Amendment and fee are sub | | |
| Please return all correspondence concerning this matt | er to the following: | |
| DOREL MITRUT | | |
| | Name of Contact Person | 1 |
| GOVIA HEALTHY | FOODS, INC. | |
| 950 NE 85TH STF | Firm/ Company | |
| 950 NE 65111 511 | Address | |
| MIAMI, FL 33138 | Addiess | |
| | City/ State and Zip Cod | e |
| DOREL@GOVIAHEA | LTHYFOODS. | COM |
| E-mail address: (to be use | ed for future annual report | notification) |
| TAX | PLANNERS, P.A. | N 1 DT |
| For further information concerning this matter, please | THORTHEAST 13 CC | FL 33162 |
| PAUL GREENSPAN @ 20-02 | 75965 at (305 | , 466-6553 |
| Name of Contact Person | Area Co | de & Daytime Telephone Number |
| Enclosed is a check for the following amount made pa | ayable to the Florida Depa | artment of State: |
| \$35 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 | Ameno Divisio Clifton 2661 E | Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301 |

Articles of Amendment to **Articles of Incorporation** of



| GOVIA REALITY FOODS, INC. | h the Florida Dept. of State) |
|---|---|
| (Name of Corporation as currently filed wi | h the Florida Dept. of State) |
| P10000094538 | |
| (Document Number of Corpo | ation (if known) |
| cursuant to the provisions of section 607.1006, Florida Status Articles of Incorporation: | es, this Florida Profit Corporation adopts the following amendment(s) t |
| If amending name, enter the new name of the corpora | ion: |
| | The new |
| name must be distinguishable and contain the word "co. "Corp.," "Inc.," or Co.," or the designation "Corp," "In word "chartered," "professional association," or the abbrev | poration," "company," or "incorporated" or the abbreviation c," or "Co". A professional corporation name must contain the iation "P.A." |
| 3. Enter new principal office address, if applicable: | 950 NE 85TH STREET |
| Principal office address MUST BE A STREET ADDRESS | MIAMI, FL 33138 |
| | |
| C. Enter new mailing address, if applicable: | (SAME AS ABOVE) |
| (Mailing address <u>MAY BE A POST OFFICE BOX</u>) | (6/11/12/13/13/13/12/ |
| | |
| | |
| D. If amending the registered agent and/or registered off new registered agent and/or the new registered office | ice address in Florida, enter the name of the address: |
| Name of New Registered Agent (N/A) | |
| · | |
| (F | orida street address) |
| New Registered Office Address: | (City) (Zip Code) |
| • | (City) (Zip Code) |
| | |
| New Registered Agent's Signature, if changing Registere | |
| I hereby accept the appointment as registered agent. I am j | miliar with and accept the obligations of the position. |

Signature of New Registered Agent, if 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> <u>Jo</u> l | hn Doe | | |
|-------------------------------|---|---------------------------------------|---------------------------------------|--|
| X Remove | <u>y</u> <u>M</u> | Mike Jones | | |
| X Add | <u>SV</u> <u>Sa</u> | lly Smith | | |
| Type of Action (Check One) | Title | Name | <u>Addres</u> s | |
| 1) × Change Add Remove | CEO / PD | DOREL MITRUT | 950 NE 85TH STREET MIAMI, FL 33138 | |
| 2) Change Add Remove | VP/0 | ADRIAN BOLBOSE | 950 NE 85TH STREET MIAMI, FL 33138 | |
| 3) Change Add Remove | | | | |
| 4) Change Add Remove | | | | |
| 5) Change Add Remove | | · · · · · · · · · · · · · · · · · · · | | |
| 6) Change Add Remove | *************************************** | | | |

| E. <u>If amendi</u> (a <i>ttach ad</i> | ng or adding addition ditional sheets, if nece | ssary). (Be specij | change(s) here: | | | |
|--|--|---|--|---|---------------------------------------|---------------------------------------|
| (N/A) | <u></u> | | | · · · · · · · · · · · · · · · · · · · | | · · · · · · · · · · · · · · · · · · · |
| (1477.1) | | | | | | |
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| provisio | endment provides for ins for implementing to ot applicable, indicate | <u>he amendment if i</u> | assification, or c not contained in | ancellation of issue the amendment its | ed shares. self <u>:</u> | |
| М&М Е | XP. ENTERP | RISE, INC. | - 100 SH | ARES | | |
| | | | | | | · |
| ADRIAN BOLE | OSE - HIS 30 SHARES CA | | AGREEMENTS NE | VER SIGNED AND SHA | ARES WERE NEV | ER ISSUED |
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| The date of each amendment(s) ac | doption: 05/29/2012 |
|--|---|
| Effective date if applicable: | /29/2012 |
| <u></u> | (no more than 90 days after amendment file date) |
| Adoption of Amendment(s) | (CHECK ONE) |
| ☐ The amendment(s) was/were add by the shareholders was/were su | opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval. |
| | proved by the shareholders through voting groups. The following statement 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) |
| action was not required. | opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder |
| Dated 05/29/ | 2012 () () () () () () () () () (|
| selecte | director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary) |
| | DOREL MITRUT |
| | (Typed or printed name of person signing) |
| | CHIEF EXECUTIVE OFFICER (P/D) |
| | (Title of person signing) |