Florida Department of State Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

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From:

Account Name : BROWARD SOHO SERVICES INC.

Account Number : I20100000080

Phone

: (954)366-3850

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COR AMND/RESTATE/CORRECT OR O/D RESIGN SWEETIES & CANDIES FB, CORP

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COVER LETTER

Division of Corporations				
NAME OF CORPO	RATION: SWEETIES	& CANDIES FE	B, CORP	
DOCUMENT NUM	D44000000E0			
	of Amendment and fee are su	hmitted for filing		
Please return all correspondence concerning this matter to the following:				
	SERGIO FLORIN			
•		Name of Contact Person		
•	SWEETIES & CANDIES FB, CORP			
	Firm/ Company			
	9999 NW 89 AVE BAY 13			
Address Address			•	
•	MEDLEY, FL 33178 City/ State and Zip Code			
		•	•	
TA	XRIGHT7@YAHC			
	E-mail address: (to be us	ed for future annual report	notification)	
For further information concerning this matter, please call:				
SERGIO FLORIN 305 887-7881				
Name	of Contact Person	Area Coo	de & 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)	
	ling Address	Street Address		
	endment Section sion of Corporations	Amendment Section Division of Corporations		
	Box 6327	Clifton Building		
Tallahassee, FL 32314		2661 Executive Center Circle Tallahassee, FL 32301		

FILED

Articles of Amendment to

Articles of Incorporation

2013 APR 16 PM 3:44

SECAL HARY OF STATE

	CORP	TALLAHASSEE,	COMO
(Name of Corporation as currently	y filed with the Florida De	ept. of State)	
P11000003503			
(Document Number	of Corporation (if known)	· · · · · · · · · · · · · · · · · · ·	
Pursuant to the provisions of section 607.1006, Flor is Articles of Incorporation:	rida Statutes, this <i>Florida P</i>	Profit Corporation adopts the fol	lowing amendment
A. If amending name, enter the new name of the	corporation:		
			The new
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Co word "chartered," "professional association." or t	orp," "Inc," or "Co". A p	pany," or "incorporated" or professional corporation name	the abbreviation must contain the
3. Enter new principal office address, if applica Principal office address MUST BE A STREET A	ble: DDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	BOX)		
•	•	,	
			·
 If amending the registered agent and/or registered agent and/or the new registered. 		orida, enter the name of the	
Name of New Registered Agent			
	77 - 7 11		
	(Florida street address	<i>v</i>	
		. Florida	
New Registered Office Address:	(City)	(Zip Coo	

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.

X Change	PT	John D	oe	
∑ Remove	<u>v</u>	Mike Jo	ones .	
X Add	<u>\$V</u>	\$ally \$	mith_	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change		_		
Add			•	
Remove		•	·	
2) Change		_		
Add				
Remove				·
3)Change				
Add	·			
Remove				
4) Change		_		
Add				-
Remove				
5) Change		_		
Add				
Remove				
の Change		_		
Add		-		
Remove				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
ARTICLE VII
Title: P
SERGIO R FLORIN 35%
9999 NW 89 AVE BAY 13 MEDLEY, FL 33178
Title: VP
VIVIAN M GONZALEZ 35%
9999 NW 89 AVE BAY 13 MEDLEY, FL 33178
Title: T
REPRESENTACIONES FLORVEN C.A. 30%
AV 4 DE MAYO EDIFICIO ARMANDO GONZALEZ #4
PORLAMAR, ISLA MARGARITA, NE. 6301 VZ
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)
(0

The date of each amendment(s) ado	ption: 03/28/2013
Effective date if applicable: 03/2	28/2013
Elictive date il applicable.	(nn more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopt by the shareholders was/were suffi	ed by the shareholders. The number of votes cast for the amendment(s) cient for approval.
	ved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):
"The number of votes cast fo	r the amendment(s) was/were sufficient for approval
by	(yoling group)
_	,
The amendment(s) was/were adopt action was not required.	ed by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopt action was not required.	ed by the incorporators without shareholder action and shareholder
Dated 03/28/20	013
<i>D.</i>	1 Million
Signature	
	by an incorporator – if in the hands of a receiver, trustee, or other court
	I fiduciary by that fiduciary)
·	SERGIO R FLORIN
	(Typed or printed name of person signing)
F	PRESIDENT
	(Title of person signing)