

(Requestor's Name)	
(Address)	700215319117
(Address)	
(City/State/Zip/Phone #)	·
PICK-UP WAIT MAIL	12/28/1101033010 **35.00
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	III DEC 28

Office Use Only



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATI	on: Xcel Food	Service Advisors	sinc
DOCUMENT NUMBER:			
The enclosed Articles of Ar	nendment and fee are su	bmitted for filing.	
Please return all correspond	lence concerning this ma	tter to the following:	
Nic	cholas Persauc	j	
		Name of Contact Person	1
Xc	el Food Servic	e Advisors	
		Firm/ Company	
21	14 sw 101 way	,	
		Address	
Mi	ramar, FL 3302	25	
		City/ State and Zip Code	•
nick37	'05@hotmail.c	om	
	E-mail address: (to be us	sed for future annual report	notification)
For further information con			204-5973
Name of Contact Person		at (Area Co.	
Enclosed is a check for the		•	
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status enclosed)	□\$43.75 Filing Fee & Certified Copy (Additional copy is (Additional C	☐\$52.50 Filing Fee Certificate of Status Certified Copy
	***************************************	(is enclosed)
Division P.O. Box	ent Section of Corporations	Amend Divisio Clifton 2661 E	Address ment Section on of Corporations Building executive Center Circle assee, FL 32301

Articles of Amendment Articles of Incorporation of

Xcel Food Service Advisors Inc

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

P11000070423

ent(s) to

(Document Number	of Corporation (if known)	7. 6
Pursuant to the provisions of section 607.1006, Flo its Articles of Incorporation:	rida Statutes, this <i>Florida Profit Corporatio</i>	on adopts the following amend
A. If amending name, enter the new name of the	e corporation:	
	_	The ne
name must be distinguishable and contain the v "Corp.," "Inc.," or Co.," or the designation "Co word "chartered," "professional association," or t	orp," "Inc," or "Co". A professional con	
B. Enter new principal office address, if applica	ble:	
(Principal office address MUST BE A STREET A	DDRESS)	
		
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE)	<u> </u>	
D. If amending the registered agent and/or regis		name of the
new registered agent and/or the new register	ed office address:	
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:	, Flo	orida .
	(City)	(Zip Code)
New Registered Agent's Signature, if changing F I hereby accept the appointment as registered agen	Registered Agent:	ations of the monition
т потеоу иссері іне арронитені из гедімегей адеп	и. — гат јатинаг wил апа ассери те овида	itions 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>	John Doe	
X Remove	<u>y</u>	Mike Jones	
_ <u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	VP	Roxanne Persaud	2114 sw 101 way Miramar Fl 33025
2) Change Add Remove	VP	Tulamdai Persaud	95-51-113 St South Richmond Hill Queens , NY 11419
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)
I am also amending the number of shares the corporation is authorized to issue.
· · · · · · · · · · · · · · · · · · ·
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)
I am also amending the number of shares the corporation is authorized to issue.
The new number of shares is 100 issued to myself (Nicholas Persuad).
This mistake was made at time of incorporation are prior vice presidents agrees with decision.

The date of each amendment(s) adoption: 11/05/11		
Effective date <u>if applicable</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.	
☐ The amendment(s) was/were app must be separately provided for	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)	
	(voting group)	
action was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
Dated 11/16/	11	
Signature	Verbles form	
	irector, president or other officer - if directors or officers have not been	
	d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
аррош	ted fiduciary by that fiduciary)	
	Nicholas Persaud	
•	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	