P11000 167670

| (Requestor's Name) | | | | |
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| (Address) | | | | |
| (Address) | | | | |
| (Ĉity/State/Zip/Phone #) | | | | |
| PICK-UP WAIT MAIL | | | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies Certificates of Status | | | | |
| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

•

| NAME OF CORPORATION:SOUTH SMO | OOTHIES INC | | | | | |
|--|---|--|--|--|--|--|
| DOCUMENT NUMBER: P11000107070 | | | | | | |
| The enclosed Articles of Amendment and fee are submitted for filing. | | | | | | |
| Please return all correspondence concerning this n | natter to the following: | | | | | |
| LORENA HERNANDE | EZ | | | | | |
| - | Name of Contact Person | | | | | |
| SOUTH SMOOTHIES | INC | | | | | |
| | Firm/ Company | | | | | |
| 9810 E CALUSA CLUE | 3 DRIVE | | | | | |
| | Address | | | | | |
| MIAMI, FLORIDA 331 | 86 | | | | | |
| | City/ State and Zip Code | | | | | |
| lorenabrandon2004@gmail. | com | | | | | |
| | used for future annual report notification) | | | | | |
| For further information concerning this matter, please call: LORENA HERNANDEZ 954 397-6885 | | | | | | |
| Name of Contact Person | at () Area Code & Daytime Telephone Number | | | | | |
| Enclosed is a check for the following amount made | • | | | | | |
| ■ \$35 Filing Fee & Certificate of Status | □\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$62.50 Filing Fee Certified Copy (Additional Copy is enclosed) | | | | | |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 | | | | | |

Articles of Amendment to

Articles of Incorporation

| of | · // /- · |
|---|---|
| SOUTH SMOOTHIES INC | 200 |
| (Name of Corporation as currentl | y filed with the Florida Dept. of State) |
| P11000107070 | Million P # 21 |
| (Document Number of | f Corporation (if known) |
| ursuant to the provisions of section 607.1006, Florida Statutes, this s Articles of Incorporation: | Florida Profit Corporation adopts the following amendment |
| . If amending name, enter the new name of the corporation: | |
| | The new |
| name must be distinguishable and contain the word "corporation" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "cord "chartered," "professional association," or the abbreviation ". | Co". A professional corporation name must contain the |
| 3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>) | |
| . Enter new mailing address, if applicable: | |
| (Mailing address MAY BE A POST OF FICE BOX) | 9810 E CALUSA CLUB DRIVE |
| | MIAMI, FLORIDA 33186 |
| | |
| If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address: | ess in Florida, enter the name of the |
| Name of New Registered Agent | |
| 9810 E CALUSA CLU | UB DRIVE |
| (Florida stre | vet address) |
| New Registered Office Address: | 33186 |
| | (City) , Florida (Cip Code) |
| (| (20) (300) |

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 Do | <u>oe</u> | |
|-------------------------------|--------------|-----------------|-------------|---------|
| X Remove | <u>V</u> | Mi <u>ke</u> Jo | ones . | |
| X Add | <u>sv</u> | Sally Sn | <u>nith</u> | |
| Type of Action (Check One) | <u>Title</u> | | <u>Name</u> | Address |
| 1) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 2) Change | | | | |
| Add | | | | |
| Remove | | | | |
| 3) Change | 7. | _ | | |
| Add | | | | |
| Remove | | | | |
| 4) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 5) Change | | | | |
| Add | | _ | | |
| Remove | | | | |
| () Char | | | | |
| S) Change | | - | | |
| Add | | | | |
| Remove | | | | |

| 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) | ling or adding additional Articles, enter change(s) here: dditional sheets, if necessary). (Be specific) | |
|--|--|--|
| provisions for implementing the amendment if not contained in the amendment itself: | ., , , , , , , , , , , , , , , , , , , | |
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| provisions for implementing the amendment if not contained in the amendment itself: | | |
| provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) | endment provides for an exchange, reclassification, or cancellation of issued shares, | |
| (if not applicable, indicate N/A) | ons for implementing the amendment if not contained in the amendment itself: | |
| | not applicable, indicate N/A) | |
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| The date of each amendment(s) adoption: | , if other than the |
|--|---|
| Effective date if applicable | |
| (no more than 90 days afte | er amendment file date) |
| Note: If the date inserted in this block does not meet the applicable statu document's effective date on the Department of State's records. | tory filing requirements, this date will not be listed as the |
| Adoption of Amendment(s) (CHECK ONE) | |
| ■ The amendment(s) was/were adopted by the shareholders. The number of by the shareholders was/were sufficient for approval. | of votes cast for the amendment(s) |
| ☐ The amendment(s) was/were approved by the shareholders through voting must be separately provided for each voting group entitled to vote separately. | |
| "The number of votes cast for the amendment(s) was/were sufficier | nt for approval |
| by | |
| (voling group) | |
| ☐ The amendment(s) was/were adopted by the board of directors without shaction was not required. | nareholder action and shareholder |
| ☐ The amendment(s) was/were adopted by the incorporators without sharely action was not required. | nolder action and shareholder |
| Dated 09/04/18 Signature Dienathemand | 4 |
| Signature & Osen Hemand |) L |
| (By a director, president or other officer – if dir selected, by an incorporator – if in the hands of | |
| appointed fiduciary by that fiduciary) | |
| LORENA HERNANDEZ | |
| (Typed or printed name of po | erson signing) |
| PRESIDENT | |
| (Title of person | signing) |