P12000020855

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13 SEP 16 AM 9: 02
SECRETARY OF STATE

C. LEWIS SEP 2 4 2013 EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: VALVE FOODSTORE INC. DOCUMENT NUMBER: P12000020885
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Person Hy Foodstore Inc. Brothers Meat Mrl Firm/Company GL9 E. Main St. Address Leesburg Fl. 34748 City/State and Zip Code Ah laalnas1234 a Jah 00: Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at 359 693-7029 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) \$43.75 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

FILED

1 1		of		
VY V FOOT	DSTORE	100.	13 SEP 16 A	H 9: 02
(Name of Corporati	ion as currently filed with	the Florida Dept. of Sta	ate) CEODMINON A	
Plann	200006	~	SECRETARY O TALLAHASSEE.	ESTATE FLORIDA
	cument Number of Corpora	tion (if known)		_ COMIDA
()000	milen Number of Corpora	uon (II known)		
ursuant to the provisions of sections Articles of Incorporation:	i 607.1006, Florida Statutes	s, this <i>Florida Profit Cor</i>	poration adopts the following	ng amendment(s
s Articles of theorporation.				
. If amending name, enter the no	ew name of the corporation	on:		
				The new
me niust be distinguishable and	l contain the word "corp	oration," "company," o	r "incorporated" or the	
Corp.," "Inc.," or Co.," or the d	lesignation "Corp," "Inc,"	" or "Co". A profession		
ord "chartered," "professional as	sociation," or the abbrevia	ntion "P.A."		
Enter new principal office add	ress if annlicable			
rincipal office address MUST BE	E A STREET ADDRESS)			_
	,			_
				
Enter new mailing address, if	annlicable:			
(Mailing address MAY BE A P				
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				_
. If amending the registered age	ent and/or registered offic	e address in Florida, en	ter the name of the	
new registered agent and/or th	ne new registered office ac	<u>ddress:</u>		
Name of New Registered A	gant			
Name of New Negisterea/L	<u> </u>			
	 		.	
	(Flor	rida street address)		
New Registered Office Add	lress:		. Florida	
The state of the s		(City)	(Zip Code)	
ew Registered Agent's Signature	e if changing Registered	Agent:		
hereby accept the appointment as			obligations of the position	
y	gg/		3 v	
			 ,	
	Signature of New Regis	tered Agent, if changing		

address of each Officer (Attach additional sheets, Please note the officer/dir P = President; V = Vice is Executive Officer; CFO sheld. President, Treasure. Changes should be noted	and/or D if necess rector titl President = Chief I r, Directo in the for	sary) le by the first letter of the office title: t; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office or would be PTD. llowing manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is orporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change,
X Change	<u>PT</u>	John Doe
X Remove	<u>v</u>	Mike Jones
X Add	<u>sv</u>	Sally Smith
Type of Action (Check One)	Title	Name Address
l) Change	<u>V_</u>	Yoser B. Hammad 949 E. Main St
Add Remove		Leesburg, FL. 34748.
2) Change		
Add		
Remove		
3) Change	- ,_ ,_ , ,	
Add		
Remove		
4) Change		
Add		
Remove		
5) Change	 	
Add		
Remove		
6) Change		

____ Add

____ Remove

	sheets, if necessary).	(Be specific)			
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an amendment	provides for an exc	hange, reclassif	ication, or cand	ellation of issued	shares,
rovisions for im	plementing the amo	enament it not c	contained in the	amendment itsei	<u>r:</u>
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The date of each amendment(s) adoption: 41000000000000000000000000000000000000	in the
Effective date if applicable: 9/12/2013 13 SEF 16 AM 9: 02 (no more than 90 days after amendment file date)	
SECRETARY OF STATE TALLAHASSEE, FLORIDA	
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	
by"	
(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 9/12/13	
Signature VOUSER NOTSON	
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)	
Typed or printed name of person signing)	
President.	
(Title of person signing)	